

|  |  |   |  |                                  |                            |                         |
|--|--|---|--|----------------------------------|----------------------------|-------------------------|
| <b>a</b> Employee's SSN 184-41-2251  |  | <b>b</b> Employer identification number (EIN) 20-1504078  |  |                                  | OMB No. 1545-0008          |                         |
| <b>c</b> Employer's name, address, and ZIP code<br>BUSINESS INTELLIGENCE SOLUTIONS I<br><br>462 HERNDON PKWY, UNIT # 107<br><br>HERNDON VA 20170 |  | <b>1</b> Wgs, tips, other compn<br>50768.00   | <b>2</b> Fed inc tax withheld<br>7613.00 | <b>3</b> Social security wages   |                            |                         |
|  |  | <b>4</b> SS tax withheld  | <b>5</b> Medicare wages & tips           | <b>6</b> Medicare tax withheld   |                            |                         |
|  |  | <b>7</b> Social security tips   | <b>8</b> Allocated tips                  | <b>9</b>                         |                            |                         |
| <b>d</b> Control number  |  | <b>10</b> Depdnt care benefits  | <b>11</b> Nonqualified plans             | <b>12a</b>                       |                            |                         |
| <b>e</b> Employee's name, address, and ZIP code<br>KAMALESHWER PEDDAMALKA<br>5535 N MILITARY TRL., # 1808<br>BOCA RATON FL 33496                 |  | <b>13</b><br>Statutory employee <input type="checkbox"/><br><br>Retirement plan <input type="checkbox"/><br><br>Third-party sick pay <input type="checkbox"/> | <b>14</b> Other                          | <b>12b</b>                       |                            |                         |
|  |  |   |  | <b>12c</b>                       |                            |                         |
|  |  |   |  | <b>12d</b>                       |                            |                         |
| <b>15</b> State<br>MI  | Employer's state ID number<br>20-1504078 | <b>16</b> State wages, tips, etc<br>8208.00   | <b>17</b> State income tax<br>348.84     | <b>18</b> Local wages, tips, etc | <b>19</b> Local income tax | <b>20</b> Locality name |

Form **W-2**  
**Wage and Tax Statement**  
**2019**

Copy B To Be Filed with Employee's FEDERAL Tax Return  
This information is being furnished to the Internal Revenue Service.

REV 12/23/19 QBDT

Department of the Treasury — IRS

|  |                                       |   |  |                                  |                            |                         |
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| <b>a</b> Employee's SSN 184-41-2251  |                                       | <b>b</b> Employer identification number (EIN) 20-1504078  |  |                                  | OMB No. 1545-0008          |                         |
| <b>c</b> Employer's name, address, and ZIP code<br>BUSINESS INTELLIGENCE SOLUTIONS I<br><br>462 HERNDON PKWY, UNIT # 107<br><br>HERNDON VA 20170 |                                       | <b>1</b> Wgs, tips, other compn<br>50768.00   | <b>2</b> Fed inc tax withheld<br>7613.00 | <b>3</b> Social security wages   |                            |                         |
|  |                                       | <b>4</b> SS tax withheld  | <b>5</b> Medicare wages & tips           | <b>6</b> Medicare tax withheld   |                            |                         |
|  |                                       | <b>7</b> Social security tips   | <b>8</b> Allocated tips                  | <b>9</b>                         |                            |                         |
| <b>d</b> Control number  |                                       | <b>10</b> Depdnt care benefits  | <b>11</b> Nonqualified plans             | <b>12a</b>                       |                            |                         |
| <b>e</b> Employee's name, address, and ZIP code<br>KAMALESHWER PEDDAMALKA<br>5535 N MILITARY TRL., # 1808<br>BOCA RATON FL 33496                 |                                       | <b>13</b><br>Statutory employee <input type="checkbox"/><br><br>Retirement plan <input type="checkbox"/><br><br>Third-party sick pay <input type="checkbox"/> | <b>14</b> Other                          | <b>12b</b>                       |                            |                         |
|  |                                       |   |  | <b>12c</b>                       |                            |                         |
|  |                                       |   |  | <b>12d</b>                       |                            |                         |
| <b>15</b> State<br>MI  | Employer's state ID No.<br>20-1504078 | <b>16</b> State wages, tips, etc<br>8208.00   | <b>17</b> State income tax<br>348.84     | <b>18</b> Local wages, tips, etc | <b>19</b> Local income tax | <b>20</b> Locality name |

Form **W-2**  
**Wage and Tax Statement**  
**2019**

Copy 2 To Be Filed With Employee's State, City, or Local Income Tax Return.

REV 12/23/19 QBDT

|  |                                       |   |  |                                  |                            |                         |
|--|---------------------------------------|---|--|----------------------------------|----------------------------|-------------------------|
| <b>a</b> Employee's SSN 184-41-2251  |                                       | <b>b</b> Employer identification number (EIN) 20-1504078  |  |                                  | OMB No. 1545-0008          |                         |
| <b>c</b> Employer's name, address, and ZIP code<br>BUSINESS INTELLIGENCE SOLUTIONS I<br><br>462 HERNDON PKWY, UNIT # 107<br><br>HERNDON VA 20170 |                                       | This information is being furnished to the IRS. 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. |  |                                  |                            |                         |
|  |                                       | <b>1</b> Wgs, tips, other compn<br>50768.00   | <b>2</b> Fed inc tax withheld<br>7613.00 | <b>3</b> Social security wages   |                            |                         |
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|  |                                       |   |  | <b>12b</b>                       |                            |                         |
|  |                                       |   |  | <b>12c</b>                       |                            |                         |
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| <b>15</b> State<br>MI  | Employer's state ID No.<br>20-1504078 | <b>16</b> State wages, tips, etc<br>8208.00   | <b>17</b> State income tax<br>348.84     | <b>18</b> Local wages, tips, etc | <b>19</b> Local income tax | <b>20</b> Locality name |

Form **W-2**  
**Wage and Tax Statement**  
**2019**

Copy C For EMPLOYEE'S RECORDS.  
(See Notice to Employee.)

REV 12/23/19 QBDT