b Employer's identification number: 90-0194958
c Employer's name, address, and ZIP code:
BIOCONVERGENCE LLC
4320 WEST ZENITH DRIVE
BLOOMINGTON IN 47404

e Employee's first name and initial / Last name:
169818
ABHISHEK SIVARAMAREDDY
2594 S FLATROCK RD
BLOOMINGTON IN 47403

f Employee's address and ZIP code

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax
IN	0122292650 001	57597.64	1860.53

12a See instructions for Box 12: AA $ 1719.78
12b: DD $ 2972.76
12c: $
12d: $

This information is being furnished to the Internal Revenue Service

Copy B To Be Filed with Employee's FEDERAL Tax Return

a Employee's soc. sec. no: 788-53-7045

1 Wages, tips, other compensation	2 Federal income tax withheld
57597.64	5305.32
3 Social security wages	4 Social security tax withheld
57597.64	3571.05
5 Medicare wages and tips	6 Medicare tax withheld
57597.64	835.17
7 Social security tips	8 Allocated tips
9	10 Dependent care benefits
11 Nonqualified plans	13 Statutory employee ☐ Retirement plan ☒ Third-party sick pay ☐
	14 Other

18 Local wages, tips, etc.	19 Local income tax	20 Locality name
57597.64	774.69	53

Form W-2 Wage and Tax Statement 2020 Department of the Treasury-Internal Revenue Service — OMB # 1545-0008 — Copy B To Be Filed With Employee's FEDERAL Tax Return

b Employer's identification number: 90-0194958
c Employer's name, address, and ZIP code:
BIOCONVERGENCE LLC
4320 WEST ZENITH DRIVE
BLOOMINGTON IN 47404

e Employee's first name and initial / Last name:
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IN	0122292650 001	57597.64	1860.53

12a See instructions for Box 12: AA $ 1719.78
12b: DD $ 2972.76
12c: $
12d: $

Copy 2 for State, City, or Local Tax Departments

a Employee's soc. sec. no: 788-53-7045

1 Wages, tips, other compensation	2 Federal income tax withheld
57597.64	5305.32
3 Social security wages	4 Social security tax withheld
57597.64	3571.05
5 Medicare wages and tips	6 Medicare tax withheld
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18 Local wages, tips, etc.	19 Local income tax	20 Locality name
57597.64	774.69	53

Form W-2 Wage and Tax Statement 2020 Department of the Treasury-Internal Revenue Service — OMB # 1545-0008 — Copy 2 To Be Filed With Employee's STATE, CITY, or LOCAL Tax Departments

REV 12/29/20 OSP

b Employer's identification number: 90-0194958
c Employer's name, address, and ZIP code:
BIOCONVERGENCE LLC
4320 WEST ZENITH DRIVE
BLOOMINGTON IN 47404

e Employee's first name and initial / Last name:
169818
ABHISHEK SIVARAMAREDDY
2594 S FLATROCK RD
BLOOMINGTON IN 47403

f Employee's address and ZIP code

15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax
IN	0122292650 001	57597.64	1860.53

12a See instructions for Box 12: AA $ 1719.78
12b: DD $ 2972.76
12c: $
12d: $

Copy 2 for State, City, or Local Tax Departments

a Employee's soc. sec. no: 788-53-7045

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57597.64	774.69	53

Form W-2 Wage and Tax Statement 2020 Department of the Treasury-Internal Revenue Service — OMB # 1545-0008 — Copy 2 To Be Filed With Employee's STATE, CITY, or LOCAL Tax Departments

b Employer's identification number: 90-0194958
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IN	0122292650 001	57597.64	1860.53

12a See instructions for Box 12: AA $ 1719.78
12b: DD $ 2972.76
12c: $
12d: $

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.

Copy C for Employee's Records (see notice to Employee on back.)

a Employee's soc. sec. no: 788-53-7045

1 Wages, tips, other compensation	2 Federal income tax withheld
57597.64	5305.32
3 Social security wages	4 Social security tax withheld
57597.64	3571.05
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18 Local wages, tips, etc.	19 Local income tax	20 Locality name
57597.64	774.69	53

Form W-2 Wage and Tax Statement 2020 Department of the Treasury-Internal Revenue Service — OMB # 1545-0008 — Copy C For Employee's Records