h Empleyer's Identification number	TAR 5000440	12a See instructions for Box 12	4 18/ 4:4	2 Federal income tox withhold
b Employer's Identification number c Employer's name, address, and ZIP code	47-5222442	le	1 Wages, tips, other compensation 73444.00	10691.19
DM LOGIC ASSOCIATES		12b	3 Social security wages	4 Social security tax withheld
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371 HOES LANE, #200		12c	5 Medicare wages and tips	6 Medicare tax withheld
3/1 110H5 HAVE, #200		\$ 12d	7 Social security tips	0.411
PISCATAWAY NJ 08854		le le	7 Social Security tips	8 Allocated tips
	Last name	\$	9	10 Dependent care benefits
	7180631	This information is being furnished to the Internal Revenue Service		
CHANDRAPRAKASH GOUD	JERTPOTHIII.A		11 Nonqualified plans	13 Statutory Retirement Third-party employee plan sick pay
46 R READING RD		Copy B To Be Filed with		
TO R READING RD		Employee's FEDERAL	14 Other	
EDICON NI 00017		Tax Return		
EDISON NJ 08817		a Employee's soc. sec. no		
f Employee's address and ZIP code		781-69-1827		
15 State Employer's state I.D. No. 16 S	State wages, tips, etc. 17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
NJ_ 475-222-442/000	73444.002698.02		+	
Form W-2 Wage and Tax Statement 2020	Department of the Treasury-Internal Revenue Service	OMB # 1545-0008	Copy B To Be Filed \	I With Employee's FEDERAL Tax Retur
2020	)			
b Employer's Identification number	47-5222442	12a See instructions for Box 12	1 Wages, tips, other compensation	
c Employer's name, address, and ZIP code		\$	73444.00	10691.19
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371 HOES LANE, #200		\$	o modical o magos una apo	o modical o tax mamora
		12d	7 Social security tips	8 Allocated tips
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e Employee's first name and initial	Last name		9	10 Dependent care benefits
	7180631		44 Nangualified plans	10
CHANDRAPRAKASH GOUD	JERTPOTHIJI A	Copy 2 for State, City, or	11 Nonqualified plans	13 Statutory Retirement Third-party employee plan sick pay
46 R READING RD		Local Tax Departments		
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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 ST.	ATE, CITY, or LOCAL Tax Department
REV 01/07/21 OSP				
	47-5222442	12a See instructions for Box 12	1 Wages, tips, other compensation	2 Federal income tax withheld
REV 01/07/21 OSP  b Employer's Identification number c Employer's name, address, and ZIP code	47-5222442	\$	73444.00	10691.19
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b Employer's Identification number c Employer's name, address, and ZIP code DM LOGIC ASSOCIATES 371 HOES LANE, #200 PISCATAWAY NJ 08854	CORPORATION INC	\$   12b     \$   12c     \$   12d     \$   12d     \$   12d	73444.00 3 Social security wages 5 Medicare wages and tips	10691.19 4 Social security tax withheld 6 Medicare tax withheld
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b Employer's Identification number c Employer's name, address, and ZIP code DM LOGIC ASSOCIATES 371 HOES LANE, #200 PISCATAWAY NJ 08854	CORPORATION INC  Last name 7180631	\$   12b     \$   12c     \$   12d     \$   12d     \$   12d	73444.00 3 Social security wages 5 Medicare wages and tips	10691.19 4 Social security tax withheld 6 Medicare tax withheld 8 Allocated tips
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b Employer's Identification number c Employer's name, address, and ZIP code DM LOGIC ASSOCIATES 371 HOES LANE, #200 PISCATAWAY NJ 08854 e Employee's first name and initial CHANDRAPRAKASH GOUD 46 R READING RD EDISON NJ 08817	CORPORATION INC  Last name 7180631	\$  2b  \$  2c  \$  2d  \$  2d  \$  Copy 2 for State, City, or Local Tax Departments	7 3 4 4 4 . 0 0 3 Social security wages 5 Medicare wages and tips 7 Social security tips 9 11 Nonqualified plans	10691.19 4 Social security tax withheld 6 Medicare tax withheld  8 Allocated tips 10 Dependent care benefits
b Employer's Identification number c Employer's name, address, and ZIP code DM LOGIC ASSOCIATES 371 HOES LANE, #200 PISCATAWAY NJ 08854 e Employee's first name and initial CHANDRAPRAKASH GOUD 46 R READING RD EDISON NJ 08817 f Employee's address and ZIP code	CORPORATION INC  Last name 7180631  JERIPOTHULA	\$  2b  \$  2c  \$  2d  \$  2d  \$  Copy 2 for State, City, or Local Tax Departments  a Employee's soc. sec. no  781-69-1827	7 3 4 4 4 . 0 0 3 Social security wages  5 Medicare wages and tips 7 Social security tips  9  11 Nonqualified plans  14 Other	10691.19 4 Social security tax withheld  6 Medicare tax withheld  8 Allocated tips  10 Dependent care benefits  13 Statutory Retirement plan sick pay
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b Employer's Identification number c Employer's name, address, and ZIP code DM LOGIC ASSOCIATES  371 HOES LANE, #200  PISCATAWAY NJ 08854 e Employee's first name and initial  CHANDRAPRAKASH GOUD 46 R READING RD  EDISON NJ 08817 f Employee's address and ZIP code 15 State Employer's state I.D. No. 16 S NJ 475-222-442/000 Form W-2 Wage and Tax Statement 2020  b Employer's Identification number c Employer's name, address, and ZIP code	CORPORATION INC  Last name 7180631 JERIPOTHULA  State wages, tips, etc. 17 State income tax 73444.00 2698.02 Department of the Treasury-Internal Revenue Service	\$   12b       \$	7 3 4 4 4 . 0 0 3 Social security wages  5 Medicare wages and tips 7 Social security tips 9 11 Nonqualified plans 14 Other  19 Local income tax	10691.19 4 Social security tax withheld 6 Medicare tax withheld  8 Allocated tips 10 Dependent care benefits  13 Statutory Retirement plan sick pay plan  20 Locality name  ATE, CITY, or LOCAL Tax Department 10691.19
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b Employer's Identification number c Employer's name, address, and ZIP code DM LOGIC ASSOCIATES 371 HOES LANE, #200 PISCATAWAY NJ 08854 e Employee's first name and initial  CHANDRAPRAKASH GOUD 46 R READING RD  EDISON NJ 08817  f Employee's address and ZIP code 15 State Employer's state I.D. No. 163 NJ 475-222-442/000 Form W-2 Wage and Tax Statement 2020  b Employer's Identification number c Employer's name, address, and ZIP code DM LOGIC ASSOCIATES 371 HOES LANE, #200 PISCATAWAY NJ 08854 e Employee's first name and initial  CHANDRAPRAKASH GOUD 46 R READING RD	CORPORATION INC  Last name 7180631 JERIPOTHULA  State wages, tips, etc. 73444.00 Department of the Treasury-Internal Revenue Service  47-5222442 CORPORATION INC  Last name 7180631	\$   \$   12b    \$   12c    \$   12d    \$   12	7 3 4 4 4 . 0 0 3 Social security wages  5 Medicare wages and tips 7 Social security tips 9 11 Nonqualified plans 14 Other 19 Local income tax  Copy 2 To Be Filed With Employee's ST. 1 Wages, tips, other compensation 7 3 4 4 4 . 0 0 3 Social security wages 5 Medicare wages and tips 7 Social security tips 9 11 Nonqualified plans	10691.19 4 Social security tax withheld 6 Medicare tax withheld  8 Allocated tips 10 Dependent care benefits 13 Statutory Retirement Third-party sick pay plan  20 Locality name  ATE, CITY, or LOCAL Tax Department 10691.19 4 Social security tax withheld 6 Medicare tax withheld 8 Allocated tips 10 Dependent care benefits
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