Copy B To Be Filed W FEDERAL Tax Return	•	oyee's	2021	OMB No. 1545-0008		To Be Filed \ Local Incom		oloyee's State,	2021	OMB No 1545-000
a. Employee's SSN		tips, other comp. 2	Federal income	tax withheld		ree's SSN		es, tips, other comp.	2 Federal income t	tax withheld
XXX-XX-9842	3 Social s		Social security t	185.46	XXX-X	XX-9842	3 Socia	3424.00	4 Social security ta	185.4
b. Employer ID number	3424.00 5 Medicare wages and tips		212.29 6 Medicare tax withheld		b. Emplo	b. Employer ID number		3424.00	212.2	
82-2214183	5 Medicai	3424.00	Medicare tax wi	49.65	82-2	214183	5 Medic	care wages and tips 3424.00	6 Medicare tax wit	49.6
c. Employer's name, addre	ss, and ZIF	P code			c. Emplo	yer's name, addre	ess, and ZIF	P code		
VISIONARY IN	NOVATI	VE TECHNOLOGY	SOLUTI		VIS	IONARY IN	NOVATI	VE TECHNOLOGY S	SOLUTI	
276 MULBERRY						MULBERRY				
PLANTSVILLE,	C1 06	9479			1	NTSVILLE,	C1 00	9479		
d. Control number 15					d. Control	Inumber				
e. Employee's name, addre	ss, and ZIP	code			e. Employ	yee's name, addre	ss, and ZIP	code		
SENTHILKUMAR		IAZHAGAN				THILKUMAR		AZHAGAN		
14875 MORMON BENNINGTON, I		007				75 MORMON NINGTON,		007		
7 Social security tips	8.8	Allocated tips			7 Social	security tips		8 Allocated tips	_	
10 Dependent care benefits	11 N	Nonqualified plans	12a Code See	inst. for box 12	10 Depend	dent care benefits	s   1 <sup>*</sup>	1 Nonqualified plans	12a Code See in	nst. for box 1
13 Statutory employee 14	3 Statutory employee 14 Other		12b Code		13 Statuto	ry employee	14 Other		12b Code	
Retirement plan			12c Code		Ret	tirement plan			12c Code	
Third party sick pay			12d Code		Third	d party sick pay	-		12d Code	
			_							
NE 14907186		3424.0	0	162.24	NE	14907186		3424.	00	162.2
15 State Emplr.'s state II 18 Local wages, tips,etc.		16 State wages, tips, etc.	17 State inco			Emplr.'s state wages, tips, etc		16 State wages, tips, etc.	17 State incor	
l l l l l l l l l l l l l l l l l l l					10 2000	9-0,				
For m W-2 Wage and Tax S	Statement		Dept. of the	Treasury IRS	Form V	W-2 Wage and Tax	State ment	 i	Dept. of the Tr	reasury IRS
This information is being	furnishe d	to the Internal Revenue Ser	vice.	39-1908647						39-19086
penalty/other sanction may	be imposed	to the IRS. If you are required on you if this income is taxable			Aw	W2-B22C	Copyri	ight AccountantsWorld, 2004		
Copy C For EMPLOYE (See Notice to Emplo)		ORDS	2021	OMB No. 1545-0008		To Be Filed V Local Incom		oloyee's State, eturn	2021	OMB No 1545-000
a. Employee's SSN	1 Wages,	tips, other comp. 3424.00	Federal income	tax withheld 185.46	a. Employ	ree's SSN	1 Wage	es, tips, other comp. 3424.00	2 Federal income to	ax withheld
XXX-XX-9842	3 Social s	security wages 4	Social security t	ax w ith held		XX-9842	3 Socia	I security wages	4 Social security tax	
b. Employer ID number	5 Medicar	3424.00 re wages and tips 6	Medicare tax w	212.29 ith held	b. Emplo	yer ID number	5 Medic	3424.00 care wages and tips	6 Medicare tax with	
82-2214183	71	3424.00		49.65		214183		3424.00		49.6
c. Employer's name, addre			001 1757			er's name, addre			NOT TIME	
276 MULBERRY		IVE TECHNOLOGY :	SOLUII			TONARY IN MULBERRY		IVE TECHNOLOGY S	OLUII	
PLANTSVILLE,	CT 06	5479			PLAI	NTSVILLE,	CT 06	5479		
d. Control number					d. Control	number				
e. Employee's name, addres	es and 7IP	2 code			15 o Employ	ree's name, addre	ss and 7ID	codo		
SENTHILKUMAR	•				' '	rees name, addre: THILKUMAR				
14875 MORMON						75 MORMON				
BENNINGTON, I	NE 680	007			BENI	NINGTON,	NE 680	007		
7 Social security tips	8 A	Allocated tips			7 Social	security tips	8	3 Allocated tips		
10 Dependent care benefit	ts 11 N	lonqualified plans	12a Code See	inst. for box 12	10 Depen	dent care benefits	s 11	Nonqualified plans	12a Code See in	nst, for box 12
13 Statutory employee 14	4 Other		12b Code		13 Statuto	ory employee	14 Other		12b Code	
Retirement plan			12c Code		Ret	irement plan			12c Code	
Third party sick pay			12d Code		Third	d party sick pay	-		12d Code	
NE 14907186		3424.0	0	162.24	NTE H	14907186		3424.	00	162.2
		3424.0		102.24	145	170/100		3424.		
15 State EmpIr.'s state ID # 16 State wages, tips, etc.  18 Local wages, tips, etc. 19 Local income tax			17 State income tax 20 Locality name							
						EmpIr.'s state wages, tips, et c.		16 State wages, tips, etc.  Local income tax	17 State incom 20 Locality nam	

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Copy 2 To Be Filed With Employee's State,

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