Copy B - For Employee's Federal Income Tax Return 2021 OMB No. 1545-0008								
a Employee's social	1 Wa	ges, tips, other o	comp.	2 Federa	l income tax withhel	ld		
security number		117709.31			21188.74			
085-47-2	137	3 Social security wages 4 Social security tax wi			security tay withheld	-		
b Employer ID number			117709.31		7298.00			
81-13321		dicare wages an						
81-13321	96 S IVIE		709.31	6 Medicare tax withheld 1706.82				
			09.31		170	0.02		
c Employer's name,								
	HEALTH LL	C						
521 S 3rd								
PHOENIX,	AZ 85004							
d Control number								
37005 15	7							
e Employee's name	address and ZID	code						
		code						
PANKAJ S		Б.						
	PACHE BLV	D						
APT 2050								
TEMPE, A	Z 85281							
7 Social security tip	s l	Allocated tips		9 Advance EIC payment				
, ,		•						
10 Dependent care	10 Dependent care benefits 1		plans	+				
To Dopondont date	DOTTOTICO	ronquamou	piano					
12a			12 Statutany ample	DIVIDO B	etirement plan 3rd	d-party sick pay		
12a AA	135	96.83	3 13 Statutory employ					
12b C.		68.34	2.24		X			
-		68.34	14 Other					
12c DD	75	14.05						
12d	, ,		l					
120								
		T	l	1				
N/A		I 1	N/A		N/A			
	•							
15 State Employer's State ID#			16 State wages, tips, etc.		17 State income tax			
18 Local wages, tips, etc.		19 Local inco	19 Local income tax		20 Locality name			
N/A		l N	N/A		N/A			
•			,		1			

Form W-2 Wage and Tax Statement
This information is being furnished to the Internal Revenue Service

Dept. of the Treasury - IRS

Copy 2 - For Employee'		[AZ]	2021				
a Employee's social security number	1 Wage	es, tips, other o	comp. 709.31	2 Federal income tax withheld 21188.74			
085-47-2137 b Employer ID number	3 Socia	al security wag 1177	es 709.31	4 Social security tax withheld 7298.00			
81-1332196			d tips 709.31	6 Medicare tax withheld 1706.82			
© Employer's name, address, an Q POINT HEALTH 521 S 3rd St PHOENIX, AZ 85	LLC						
d Control number 37005 157							
e Employee's name, address, an PANKAJ S SONGI. 1221 E APACHE : APT 2050 TEMPE, AZ 8528	RE BLVD						
7 Social security tips		8 Allocated tips			ance EIC paymer	nt	
10 Dependent care benefits		11 Nonqualified plans					
12a AA 12b	AA 13596				oyee Retirement plan 3rd-party sick pay		
C DD	68.34 7514.05		14 Other				
12d			15500 01			4940.85	
AZ 81-1332196		117709.31 16 State wages, tips, etc.		17 St	4940.85		
18 Local wages, tips, etc.		19 Local income tax			20 Locality name		
N/A		N/A			N/A		

Form W-2 Wage and Tax Statement

Dept. of the Treasury - IRS

Copy C - I	FOR EMPI	OYE	EE'S REC	CORDS ONI	LY	202	OMB No. 1545-0008	
a Employee's so security number	er	1 Wages, tips, other com		·	2 Feder	Federal income tax withheld 21188.74		
b Employer ID number		3 Social security wages 117709.31		4 Social security tax withheld 7298.00				
		5 Medicare wages and tips 117709.31			6 Medicare tax withheld 1706.82			
521 S 3	' HEALTH	LLC						
d Control numbe 37005 1								
1221 E APT 205	S SONGIF APACHE F	RE BLVD						
7 Social security tips		8 /	8 Allocated tips		9 Advance EIC payment			
10 Dependent ca	are benefits	11	Nonqualified	plans				
12a AA		13596.83		13 Statutory employee Retirement plan 3rd-party sick party			3rd-party sick pay	
12c DD		68.34		14 Other				
12d DD	7514.05							
AZ 81-	1332196 1		17709.31		4940.85			
15 State Employer's State ID#		16 State wages, tips, etc.			tate income tax			
18 Local wages, tips, etc.			19 Local income tax		20 L	ocality name		

N/A

Form W-2 Wage and Tax Statement

N/A

Dept. of the Treasury - IRS

N/A