							Federal Box 1	Soc. Sec. Box 3	& 7 Medicare Box 5		
To the right is an	explanation of t	the contents o	f the wage	boxes on your W-2.	Gross Wage	es	136500.	00 136500	.00 136500.0		
Please note that					Txbl Benefit	ts	451.	92 451	.92 451.93		
					Group Term	Life	112.	00 112	.00 112.0		
					Adoption						
					Deferred Co	nmn	(6900.0	10)			
					Section 125	•	(6520.0	• •	08) (6520.08		
						x/Wage Limit	(052010	(0320.	(0320.00		
					W-2 Wages	,	123643.	84 130543	.84 130543.8		
0. CONTROL NUMBER	This Information is	OMB NO 15/5-0008				1. WAGES, TIPS, OTHER COMPENSATION 123643.84			2. FEDERAL INCOME TAX WITHHELD 16370.77		
	892866101 to the Internal Revenue Service 2021 ONIO NO. 1343-0000					CURITY WAGES	1043.04	4. SOCIAL SECURITY 1			
3-3806691	TIOI VOINDER	487-65-4464		WIT NOWIDEN	3. SOCIAL SE		543.84	4. SOCIAE SECONITI	8093.72		
C. EMPLOYER'S NAME, A	DDRESS, AND ZIP C	ODE			5. MEDICARE	WAGES AND TIP	S	6. MEDICARE TAX WI	THHELD		
Blackrock Financial M	anagement, Inc.					130	543.84		1892.89		
40 East 52nd Street New York NY 10022					7. SOCIAL SEC	CURITY TIPS		8. ALLOCATED TIPS			
					9.			10. DEPENDENT CARE	BENEFITS		
. EMPLOYEE'S FIRST NAI	ME AND INITIAL	LAST N	AME	SUFF.	11. NONQUAL	IFIED PLANS		12.a-d C	112.0		
Anshul		Sharm	na					D	6900.0		
76 Saint Pauls Avenu	ie, Apt 2J				14. OTHER NY	Txbl Wage	123643.84	w	3758.6		
Jersey City NJ 07306 USA						FL FL	385.34	DD	15107.1		
F. EMPLOYEE'S ADDRESS	AND ZIP CODE							13. STATUTORY RET	REMENT X THIRD PARTY N SICK PAY		
15. STATE EMPLOYER	S STATE I.D. NO. 691/000	16. STATE WAG	ES, TIPS, ETC 130870.4		AX 229.93	18. LOCAL WAGE	S, TIPS, ETC. 19	LOCAL INCOME TAX	20. LOCALITY NAME		

D. CONTROL 000892866		This Information is to the Internal Rev		2021	OMB N	O. 1545-0008	1. WAGES, T	PS, OTHER COMP 123	ENSATION 8643.84		2. FEDERAL INCOME TA	X WITHHELD 16370.77	
B. EMPLOYER IDENTIFICATION NUMBER A. EMPLOYEE'S SOCIAL SECURITY NUMBER							3. SOCIAL SE	CURITY WAGES			4. SOCIAL SECURITY TO	AX WITHHELD	
13-3806691 487-65-4464						130543.84					8093.72		
C. EMPLOYE	R'S NAME, AE	DDRESS, AND ZIP C	ODE				5. MEDICARE	WAGES AND TIP	S		6. MEDICARE TAX WIT	HHELD	
		anagement, Inc.						130	543.84	1892.89			
40 East 52nd Street New York NY 10022						7. SOCIAL SEC							
							9.				10. DEPENDENT CARE BENEFITS		
E. EMPLOYE	E'S FIRST NAM	IE AND INITIAL	LAST NA	AME		SUFF.	11. NONQUALIFIED PLANS				12.a-d C	112.00	
Anshul			Sharm	ıa							D	6900.00	
76 Saint P	auls Avenu	e, Apt 2J					14. OTHER NY	Txbl Wage	123643.	84	w	3758.69	
Jersey City								/ FL	385.	34	DD	15107.19	
USA  F. EMPLOYEE'S ADDRESS AND ZIP CODE									13. STATUTORY RETIF	REMENT X THIRD PARTY SICK PAY			
15. STATE	EMPLOYER'S	STATE I.D. NO.	16. STATE WAG	ES, TIPS, ET	TC. 1	17. STATE INCOME T	AX	18. LOCAL WAGE	S, TIPS, ETC.	19.	LOCAL INCOME TAX	20. LOCALITY NAME	
NJ	133-806-6	591/000		130870.	.47		229.93						

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2021

Dept. of the Treasury - Internal Revenue Service

# FORM W-2 Wage and Tax Statement

D. CONTROL NU 00089286610	11110 1111011111011110		2021 OM	B NO. 1545-0008	1. WAGES, TIPS, OTHER COMPENSATION 123643.84		2. FEDERAL INCOME T	AX WITHHELD 16370.77		
B. EMPLOYER IDENTIFICATION NUMBER A. EMPLOYEE'S SOCIAL SECURITY NUMBER 487-65-4464						3. SOCIAL SECURITY WAGES 130543.84			4. SOCIAL SECURITY TAX WITHHELD 8093.72	
	NAME, ADDRESS, AND ZIP Clancial Management, Inc.	ODE			5. MEDICARE	WAGES AND TIPS 1305	43.84	6. MEDICARE TAX W	THHELD 1892.89	
40 East 52nd Street New York NY 10022						7. SOCIAL SECURITY TIPS 8. ALLOCATED TIPS				
								10. DEPENDENT CARE	BENEFITS	
E. EMPLOYEE'S Anshul	FIRST NAME AND INITIAL	LAST NA Sharm		SUFF.	11. NONQUAL	IFIED PLANS		12.a-d <sub>C</sub>	112.00 6900.00	
76 Saint Pauls Avenue, Apt 2J Jersey City NJ 07306 USA					14. OTHER NY	′ Txbl Wage ′ FL	123643.8 385.3		3758.69 15107.19	
F. EMPLOYEE'S ADDRESS AND ZIP CODE								13. STATUTORY RET	REMENT X THIRD PARTY SICK PAY	
	MPLOYER'S STATE I.D. NO. .33-806-691/000	16. STATE WAGE	130870.47	17. STATE INCOME 1	229.93	18. LOCAL WAGES	TIPS, ETC.	19. LOCAL INCOME TAX	20. LOCALITY NAME	

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Dept. of the Treasury - Internal Revenue Service

## FORM W-2 Wage and Tax Statement

D. CONTROL NUMBER	This Information is being furnished	OMR NO	1545-0008	1. WAGES, TIPS, OTHER COMPENSATION	2. FEDERAL INCOME TAX WITHHELD

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# Earnings - Dayforce

00089286	6101	to the Internal Rev	enue Service	2021	CIVIDI	10. 1373 0	000			12364	3.84			16370.77	
B. EMPLOYE	R IDENTIFICA	TION NUMBER	A. EMPLOYEE'S	SOCIAL SEC	CURITY NU	MBER		3. SOCIAL SECURITY WAGES				4. SOCIAL SECURITY TAX WITHHELD			
13-3806691 487-65-4464								13054	3.84			8093.72			
C. EMPLOYER'S NAME, ADDRESS, AND ZIP CODE							5. MEDICARE	WAGES AND	TIPS			6. MEDICARE TAX WIT	HHELD		
Blackrock	Financial M	lanagement, Inc.								13054	3.84			1892.89	
40 East 52nd Street New York NY 10022					7. SOCIAL SECURITY TIPS 8. ALLOCATED TIPS										
								9.					10. DEPENDENT CARE E	BENEFITS	
E. EMPLOYE	E'S FIRST NA	ME AND INITIAL	LAST N	AME		SU	IFF.	11. NONQUAL	IFIED PLANS				12.a-d C	112	2.00
Anshul			Sharm	na									D	6900	
76 Saint F	Pauls Avenu	ie. Apt 2J						14. OTHER NY	Txbl Wage		123643.	84	w	3758	8.69
	y NJ 07306								/ FL		385.	34	DD	15107	7.19
	E'S ADDRESS	AND ZIP CODE											13. STATUTORY RETIR	EMENT X THIRD PART	Y
15. STATE	EMPLOYER	S STATE I.D. NO.	16. STATE WAG	ES, TIPS, E	TC.	17. STATE INCO	ME T	AX	18. LOCAL	WAGES,	TIPS, ETC.	19.	LOCAL INCOME TAX	20. LOCALITY NAME	
NJ	133-806-	691/000		130870	0.47			229.93							
Сору В То	opy B To be filed with Employee's FEDERAL tax return							2021			Dept. o	f th	ne Treasury - Inter	nal Revenue Ser	vice

FORM W-2 Wage and Tax Statement

2021

						• •				
D. CONTROL NUMBER 000892866102	This Information is to the Internal Rev		2021	OMB NO. 1545-00	1. WAGES,	TIPS, OTHER COMPENSATION	2. FEDERAL INCOME T	AX WITHHELD		
B. EMPLOYER IDENTIFICA 13-3806691		A. EMPLOYEE'S 487-65-4464		RITY NUMBER	3. SOCIAL S	ECURITY WAGES	4. SOCIAL SECURITY T	AX WITHHELD		
C. EMPLOYER'S NAME, AI Blackrock Financial M		CODE			5. MEDICAR	E WAGES AND TIPS	6. MEDICARE TAX WI	THHELD		
40 East 52nd Street New York NY 10022	anagement, mc.				7. SOCIAL SE	CURITY TIPS	8. ALLOCATED TIPS			
					9.		10. DEPENDENT CARE	BENEFITS		
E. EMPLOYEE'S FIRST NAM Anshul	ME AND INITIAL	LAST NA Sharm		SU	FF. 11. NONQUA	LIFIED PLANS	12.a-d			
76 Saint Pauls Avenu Jersey City NJ 07306 USA					14. OTHER					
F. EMPLOYEE'S ADDRESS							EIVIPLOTEE PLAI			
15. STATE EMPLOYER'S 13380669	S STATE I.D. NO. 91	16. STATE WAG	123643.		8400.09	18. LOCAL WAGES, TIPS, ETC	C. 19. LOCAL INCOME TAX	20. LOCALITY NAME		
D. CONTROL NUMBER 000892866102	This Information is		2021	OMB NO. 1545-00	1. WAGES,	TIPS, OTHER COMPENSATION	2. FEDERAL INCOME T	AX WITHHELD		
B. EMPLOYER IDENTIFICATION B. 13-3806691	to the Internal Rev TION NUMBER	A. EMPLOYEE'S 487-65-4464		RITY NUMBER	3. SOCIAL S	ECURITY WAGES	4. SOCIAL SECURITY T	4. SOCIAL SECURITY TAX WITHHELD		
C. EMPLOYER'S NAME, A		ODE			5. MEDICAR	E WAGES AND TIPS	6. MEDICARE TAX WI	THHELD		
Blackrock Financial M 40 East 52nd Street New York NY 10022	anagement, Inc.				7. SOCIAL SE	CURITY TIPS	8. ALLOCATED TIPS			
					9.		10. DEPENDENT CARE	BENEFITS		
E. EMPLOYEE'S FIRST NAM	ME AND INITIAL	LAST NA		SU	FF. 11. NONQUA	LIFIED PLANS	12.a-d			
76 Saint Pauls Avenu Jersey City NJ 07306 USA			-		14. OTHER					
F. EMPLOYEE'S ADDRESS  15. STATE EMPLOYER'S	S STATE I.D. NO.	16. STATE WAG				18. LOCAL WAGES, TIPS, ETC	EMPLOYEE PLAI	REMENT X THIRD PARTY SICK PAY  20. LOCALITY NAME		
NY 13380669 Copy 2 To be filed		e's STATE, CI	123643. TY, or LO		8400.09	Dept.	of the Treasury - Inter	rnal Revenue Service		
FORM W-2 Wage	e and Tax S	tatement								
D. CONTROL NUMBER 000892866102	This Information is to the Internal Rev	renue Service	2021	OMB NO. 1545-00	1. WAGES,	TIPS, OTHER COMPENSATION	2. FEDERAL INCOME T	AX WITHHELD		
B. EMPLOYER IDENTIFICA 13-3806691		A. EMPLOYEE'S 487-65-4464	SOCIAL SECU	RITY NUMBER	3. SOCIAL S	ECURITY WAGES	4. SOCIAL SECURITY T	'AX WITHHELD		
C. EMPLOYER'S NAME, AI Blackrock Financial M					5. MEDICAR	E WAGES AND TIPS	6. MEDICARE TAX WI	THHELD		
40 East 52nd Street New York NY 10022						CURITY TIPS	8. ALLOCATED TIPS	8. ALLOCATED TIPS		
					9.		10. DEPENDENT CARE	BENEFITS		
E. EMPLOYEE'S FIRST NAM Anshul	ME AND INITIAL	LAST NA Sharm		SU		LIFIED PLANS	12.a-d			
76 Saint Pauls Avenu Jersey City NJ 07306 USA					14. OTHER					
F. EMPLOYEE'S ADDRESS	AND ZIP CODE S STATE I.D. NO.	16. STATE WAG	EC TIPE ET	C. 17. STATE INCO	ME TAY	18. LOCAL WAGES, TIPS, ETC	EMPLOYEE PLA			
NY 13380669	91		123643.	84	8400.09			20. LOCALITY NAME		
Copy 2 To be filed FORM W-2 Wage			TY, or LO	CAL tax return	2021	Dept	of the Treasury - Into	ernal Revenue Service		

D. CONTROL NUMBER 000892866102	This Information is being furnished to the Internal Revenue Service	2021	OMB NO. 1545-0008	1. WAGES, TIPS, OTHER COMPENSATION	2. FEDERAL INCOME TAX WITHHELD
000092800102	to the internal nevenue service	2021			

# Earnings - Dayforce

B. EMPLOYE	R IDENTIFICATION NUMBER	A. EMPLOYEE'S SOCIAL SECURITY N	IUMBER	3. SOCIAL SE	CURITY WAGES	4. SOCIAL SECURI	Y TAX WITHHELD		
13-380669	91	487-65-4464							
C. EMPLOYE	R'S NAME, ADDRESS, AND ZIP O	CODE		5. MEDICARE	WAGES AND TIPS	6. MEDICARE TAX	WITHHELD		
Blackrock	Financial Management, Inc.								
40 East 52nd Street New York NY 10022				7. SOCIAL SEC	CURITY TIPS	8. ALLOCATED TIP	8. ALLOCATED TIPS		
				9.		10. DEPENDENT CA	RE BENEFITS		
E. EMPLOYE	E'S FIRST NAME AND INITIAL	LAST NAME	SUFF.	11. NONQUAL	IFIED PLANS	12.a-d	12.a-d		
Anshul		Sharma							
	Pauls Avenue, Apt 2J y NJ 07306			14. OTHER					
	E'S ADDRESS AND ZIP CODE						RETIREMENT X THIRD PARTY DICK PAY		
15. STATE	EMPLOYER'S STATE I.D. NO.	16. STATE WAGES, TIPS, ETC.	17. STATE INCOME 1	ΓAX	18. LOCAL WAGES, TIPS, ETC.	19. LOCAL INCOME TA	X 20. LOCALITY NAME		
NY	133806691	123643.84		8400.09					

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FORM W-2 Wage and Tax Statement