a Employee's social security number	1 Wages, tips, other compensation	2 Federal income tax withheld			
763-86-2668	32219.21	5168.39			
700 00 2000	3 Social security wages	4 Social security tax withheld			
b Employer identification number (EIN)	35594.21	2206.84			
46-0646002	5 Medicare wages and tips	6 Medicare tax withheld			
40 0040002	35594.21	516.14			
c Employer's name, address, and ZIP co	c Employer's name, address, and ZIP code				
Superpedestria	Superpedestrian Inc				
84 Hamilton St					
Cambridge, MA, 02139					
d Control number 867706-21675176					
e Employee's name address and ZIP code					
Ankit Pandey					
15 Walter Ter	rago				
Somerville, M	A, UZ145				
7 Social security tips	8 Allocated tips	9			
10 Dependent care benefits	11 Nonqualified plans	12a See instructions for box 12			
		C 20.40			
13	14 Other	D 3375.00			
Statutory		12c			
		DD 1426.20			
Retirement plan		12d			
☐ Third-party		9			
sick pay		12e			
MA H-11398910-00	32219.21	1501.79			
15 State Employer's state ID number		17 State income tax			
18 Local wages, tips, etc.	19 Local income tax	20 Locality name			
Copy B To Be Filed With Employed	Copy B To Be Filed With Employee's FEDERAL Tax Return.				

Form W-2 Wage and Tax Statement





Department of the Treasury-Internal Revenue Service

Copy C—For EMPLOYEE'S RECORDS. 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 fall to report it.

	d on you if this income is taxable	and you rain to roport in		
a Employee's social security number	1 Wages, tips, other compensation	2 Federal income tax withheld		
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b Employer Identification number (EIN)	35594.21	2206.84		
46-0646002	5 Medicare wages and tips	6 Medicare tax withheld		
	35594.21	516.14		
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84 Hamilton St				
Cambridge, MA,	02139			
d Control number 867706-21675176				
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Retirement plan		12d		
☐ Third-party		9		
☐ sick pay		12e		
MA H-11398910-00	32219.2	1501.79		
15 State Employer's state ID number	16 State wages, tips, etc.	17 State income tax		
18 Local wages, tips, etc.	19 Local income tax	20 Locality name		
Copy C For EMPLOYEE'S RECORI	DS.			

Copy 2—To Be Filed With Employee's State, City, or Local Income Tax Return. This information is being furnished to the Internal Revenue Service.

a Employee's social security number 763-86-2668	1 Wages, tips, other compensation 32219.21	2 Fee	leral income tax withheld 5168.39	
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46-0646002	35594.21	O IVIE	516.14	
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84 Hamilton St Cambridge, MA,	02139			
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Form W-2 Wage and Tax Zenefi	ts 2021		Department of the Treasury- Internal Revenue Service	

Copy 2—To Be Filed With Employee's State, City, or Local Income Tax Return. This information is being furnished to the Internal Revenue Service.

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a Employee's social security number $763-86-2668$	1 Wages, tips, other compensation 32219.21	2 Federal income tax withheld 5168.39			
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15 State Employer's state ID number		17 State income tax			
18 Local wages, tips, etc.	19 Local income tax	20 Locality name			
Copy 2 To Be Filed With Employee's State, City, or Local Income Tax Return.					
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Statement



