Form W-2 Wage and Tax Statement 2021	7 Social security tips	1 Wages, tips, other comp.	2 Federal income tax withheld  16273 17
c Employer's name, address, and ZIP code	8 Allocated tips	3 Social security wages	4 Social security tax withheld
INSURANCE SERVICES OFFICE, INC	9	25517.90 5 Medicare wages and tips	1582.11 6 Medicare tax withheld
545 WASHINGTON BLVD JERSEY CITY NJ 07310		25517.90	370.01
UERSEI CIII NO 07310	10 Dependent care benefits	11 Nonqualified plans	12a See instructions for box 12
e Employee's name, address, and ZIP code	13 Statutory Retirement Third-party sick pay	14 Other	12b
SIVA SHASHANK CHINTAPENTA	<b>b</b> Employer identification number (EIN)	Medical 1725.36	DD 7531.92
107 WAVERLY ST	13-3131412	Vision 59.04	Code
JERSEY CITY NJ 07306	a Employee's social security no.		12d
		1	e
15 State Employer's state I.D. no. 16 State wages, tips, etc.		cal wages, tips, etc. 19 Local inc	,
N.T. 133131412000 98854			276 71 FT.T
Copy B To Be Filed With Employee's FEDERAL Tax Return	This information is being furnished to the ON	Internal Revenue Service. MB No. 1545-0008	Dept. of the Treasury - IRS Visit the IRS Web Site at www.irs.gov/efile
		This information is being furnished to the Internal Re	venue Service. If you are required to file a tax return, a ad on you if this income is taxable and you fail to report it.
	7 Social security tips	negligence penalty or other sanction may be impose  1 Wages, tips, other comp.	ed on you if this income is taxable and you fail to report it.  2 Federal income tax withheld
Form W-2 Wage and Tax Statement 2021		96866.60	16273.17
c Employer's name, address, and ZIP code INSURANCE SERVICES OFFICE, INC	8 Allocated tips	3 Social security wages 25517.90	4 Social security tax withheld 1582.11
545 WASHINGTON BLVD	9	5 Medicare wages and tips	6 Medicare tax withheld
JERSEY CITY NJ 07310	10 Dependent care benefits	25517.90 11 Nonqualified plans	370.01 12a See instructions for box 12
		11 Nonquamed plans	<sup>c</sup> C 30.81
e Employee's name, address, and ZIP code	13 Statutory employee Petirement plan Third-party sick pay	14 Other	12b
SIVA SHASHANK CHINTAPENTA	<b>b</b> Employer identification number (EIN)	Medical 1725.36	DD 7531.92 12c
107 WAVERLY ST	13-3131412	Vision 59.04	104
JERSEY CITY NJ 07306	a Employee's social security no. 357-79-4155		<b>12d</b>
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15 State         Employer's state I.D. no.         16 State wages, tips, etc.           N.T.         133131412000         98854		cal wages, tips, etc. 19 Local inc	
Copy C For EMPLOYEE'S RECORDS (See Notice to Employee on back of	от Сору в)	MB No. 1545-0008	Dept. of the Treasury - IRS
	7 Social security tips	1 Wages, tips, other comp.	2 Federal income tax withheld
Form W-2 Wage and Tax Statement 2021		96866.60	16273.17
c Employer's name, address, and ZIP code  TNCLID ANGE CERVICES OFFICE TNC	8 Allocated tips	3 Social security wages 25517.90	4 Social security tax withheld  1582.11
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e Employee's name, address, and ZIP code	13 Statutory Retirement Third-party sick pay	14 Other	12b
SIVA SHASHANK CHINTAPENTA	<b>b</b> Employer identification number (EIN)		DD 7531.92 12c
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	1337-79-4133		12d
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15 State Employer's state I.D. no. 16 State wages, tips, etc.	17 State income tax 18 Loc	cal wages, tips, etc. 19 Local inc	ome tax 20 Locality name
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	17 State income tax		ome tax 20 Locality name
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N.T	17 State income tax		ome tax 276 . 71
N.T	17 State income tax 4529 .85	1 Wages, tips, other comp.	ome tax 27671 PT.T.  Dept. of the Treasury - IRS  2 Federal income tax withheld 1627317
N.T. 133131412000 98854  Copy 2 To Be Filed With Employee's State, City, or Local Income Tax Re  Form W-2 Wage and Tax Statement Complete State Statement Complete State	17 State income tax	MB No. 1545-0008  1 Wages, tips, other comp.	ome tax 20 Locality name 276. 71 FT.T  Dept. of the Treasury - IRS  2 Federal income tax withheld
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