

Copy B To Be Filed With Employee's Federal Tax Return		2021		OMB No. 1545-0008	
a Control number	1 Wages, tips, other comp.	2 Federal income tax withheld			
CN02460	119896.37	19364.76			
b Employer ID number	3 Social security wages	4 Social security tax withheld			
	119896.37	7433.57			
271598575	5 Medicare wages and tips	6 Medicare tax withheld			
	119896.37	1738.50			
c Employer's name, address, and ZIP code					
Trion Solutions II Inc 888 WEST BIG BEAVER ROAD SUITE 1000 TROY, MI 48084					
d Employee's social security number					
884870583					
e Employee's name, address, and ZIP code					
Nithin Chandra Channa 611 Lowell Ave Apt 15 Cincinnati, OH 45220					
7 Social security tips	8 Allocated tips	9 Advance EIC payment			
0.00	0.00	0.00			
10 Dependent care benefits	11 Nonqualified plans				
0.00	0.00				
12a DD	12018.78	13 Stat. Emp.	Ret. plan	3rd-party sick pay	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12b		14 Other			
12c					
12d					
OH 53-028712	119896.37	4154.97			
15 State Employer's State ID #	16 State wages, tips, etc.	17 State income tax			
18 Local wages, tips, etc.	19 Local income tax	20 Locality name			
119896.37	2169.82	OHREUD			

Form W-2 Wage and Tax Statement
This information is being furnished to the Internal Revenue Service Dept. of the Treasury - IRS

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10 Dependent care benefits	11 Nonqualified plans				
0.00	0.00				
12a DD	12018.78	13 Stat. Emp.	Ret. plan	3rd-party sick pay	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12b		14 Other			
12c					
12d					
OH 53-028712	119896.37	4154.97			
15 State Employer's State ID #	16 State wages, tips, etc.	17 State income tax			
18 Local wages, tips, etc.	19 Local income tax	20 Locality name			
119896.37	2169.82	OHREUD			

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	119896.37	1738.50			
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d Employee's social security number					
884870583					
e Employee's name, address, and ZIP code					
Nithin Chandra Channa 611 Lowell Ave Apt 15 Cincinnati, OH 45220					
7 Social security tips	8 Allocated tips	9 Advance EIC payment			
0.00	0.00	0.00			
10 Dependent care benefits	11 Nonqualified plans				
0.00	0.00				
12a DD	12018.78	13 Stat. Emp.	Ret. plan	3rd-party sick pay	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12b		14 Other			
12c					
12d					
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