| Copy B-To Be Filed With Employee's   |           |                  |           |            | OMB No. 1545-0008              |
|--|-----------|------------------|-----------|------------|--------------------------------|
| FEDERAL Tax Return.  a Employee's soc. sec. no. 1 Wages, tips, other comp.   |           |                  |           |            | 2 Federal income tax withheld  |
| Employee's soc. sec. I   | no.       |                  | 125.      |            | . 00                           |
| 210-27-471   | 6         | 3 Social sec     |           |            | 4 Social security tax withheld |
| b Employer ID number (EIN)   |           | 125.00           |           | 00         | 7.75                           |
|  |           | 5 Medicare       | wages and | tips       | 6 Medicare tax withheld        |
| 4-3371176  | ;         |                  | 125.      | 00         | 1.81                           |
| Employer's name, add   |           | nd ZIP code      |           |            |                                |
| TRIVENI S  | CHC       | OL               |           |            |                                |
| 67 POWELI  | SI        | REET             |           |            |                                |
| BROOKLINE  |           |                  | MA        | 0214       | 16                             |
| DICOCKTILIA  | •         |                  |           |            |                                |
|  |           |                  |           |            |                                |
| Control number   |           |                  |           |            |                                |
| 014  | aluena    | and 7ID code     |           |            |                                |
| Employee's name, ad  | dress, a  | and ZIP code     |           |            |                                |
| ODITOIT 127  | TETT      | TIDIT            |           |            |                                |
| SRUTHI KA  | YVOI      |                  | 1 1 5     |            |                                |
| 5 VILLAGE  | S W.F     | AY API           | 15        |            | 01760                          |
| NATICK   |           |                  | MA        |            | 01/00                          |
| 7 Social security tips   |           | 8 Allocated tips |           |            | 9                              |
|  | .00       |                  |           |            | 6 1 0 1 to 1 to 1 to 1 to 1    |
| O Dependent care bene  |           | 11 Nonquali      |           | 00         | 12a Code See inst. for box 12  |
|  | .00       |                  | •         | 00         | 101 O-d-                       |
| 3 Statutory employee   | 14 Oth    | er               |           |            | 12b Code                       |
|  | MAP       | PFML .47         |           |            |                                |
| Retirement plan  |           |                  |           |            | 12c Code                       |
| AND STREET, ST |           |                  |           |            |                                |
| Third-party sick pay   | 1         |                  |           |            | 12d Code                       |
|  |           |                  |           |            |                                |
|  |           |                  |           |            | 0.0                            |
| MA WTH-117197  | 702-00    | 0                | 125.      | .00        | .00                            |
| 5 State Employer's state   | te ID nu  | mber 16 Star     | te wages, | tips, etc. | 17 State income tax            |
| 8 Local wages, tips, et  |           | 19 Local inc     |           |            | 20 Locality name               |
|  |           |                  |           |            |                                |
|  |           |                  |           | 1000       |                                |
| am Ma Mana and   | Tay Sta   | tement           | 20        | 77.        | Dept. of the Treasury - IR     |
| orm W-2 Wage and his information is being f  | urniches  | to the Interns   | these man |            |                                |
| his information is being t   | UllistieC | a to the interne |           |            |                                |
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|  |           |                  |           |            |                                |

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|--|---|--------------------------------|
| City, or Local Income Ta                                     | 2 Federal income tax withheld                 |                                |
| a Employee's soc. sec. no.                                   | 1 Wages, tips, other comp.<br>125.00          | .00                            |
| 210-27-4716  | 3 Social security wages                       | 4 Social security tax withheld |
|  | 125.00  | 7.75                           |
| <b>b</b> Employer ID number (EIN)                            | 5 Medicare wages and tips                     | 6 Medicare tax withheld        |
| 04-3371176   | 125.00  | 1.81                           |
| c Employer's name, address, a TRIVENI SCHO 67 POWELL STANDED | OOL   | 16                             |
| d Control number   |   |                                |
| SRUTHI KAKU<br>5 VILLAGE W<br>NATICK                         | AY APT 15<br>MA                               | 01760                          |
| 7 Social security tips<br>. 0 0                              | 8 Allocated tips                              | 9                              |
| 10 Dependent care benefits<br>. 0 0                          | 11 Nonqualified plans<br>. 0 0                | 12a Code                       |
| 13 Statutory employee 14 Oti                                 | ner<br>PFML .47                               | 12b Code                       |
| Retirement plan  |   | 12c Code                       |
| Third-party sick pay   | 12d Code                                      |                                |
| MA WTH-11719702-1  | 00 125.00<br>umber 16 State wages, tips, etc. | . 00                           |
| 18 Local wages, tips, etc.                                   | 19 Local income tax                           | 20 Locality name               |
| Form W-2 Wage and Tax St                                     | atement 2021                                  | Dept. of the Treasury - IR     |

| Copy C-For EMPLOYE                   | E'S RECORDS (See   | OMB No. 1545-0008  |
|--------------------------------------|--|--|
| Votice to Employee on th             | 2 Federal income tax withheld  |  |
| Employee's soc. sec. no.             | 1 Wages, tips, other comp.<br>125.00   | .00  |
| 210-27-4716                          | 3 Social security wages  | 4 Social security tax withheld   |
| Employer ID number (EIN)             | 125.00   | 7.75   |
|                                      | 5 Medicare wages and tips  | 6 Medicare tax withheld  |
| 04-3371176                           | 125.00   | 1.81   |
| TRIVENI SCH                          | and ZIP code OOL TREET MA 0214   | 16   |
| d Control number<br>014              | and 7ID and  |  |
| e Employee's name, address,          | and ZIP code   |  |
| SRUTHI KAKU<br>5 VILLAGE W<br>NATICK | AY APT 15<br>MA  | 01760  |
| 7 Social security tips               | 8 Allocated tips   | 9  |
| Dependent care benefits     O        | 11 Nonqualified plans  | 12a Code See inst. for box 12  |
| 3 Statutory employee 14 Ot           | 12b Code   |  |
| Retirement plan                      | 12c Code   |  |
| Third-party sick pay                 |  | 12d Code   |
| MA WTH-11719702-0                    | 125.00<br>umber 16 State wages, tips, etc.   | . 00   |
|                                      | 19 Local income tax  | 20 Locality name   |
| 8 Local wages, tips, etc.            | Local modific tax  |  |
| orm W-2 Wage and Tax St              | atement 2021<br>at to the IRS. If you are required to f<br>imposed on you if this income is ta | Dept. of the Treasury - IR<br>ile a tax return, a negligence<br>xable and you fail to report it. |

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| City, or Local Income Ta                                     | 2 Federal income tax withheld              |                                 |
| a Employee's soc. sec. no.                                   | 1 Wages, tips, other comp.<br>125.00       | .00                             |
| 210-27-4716  | 3 Social security wages                    | 4 Social security tax withheld  |
| <b>b</b> Employer ID number (EIN)                            | 125.00                                     | 7.75                            |
|  | 5 Medicare wages and tips                  | 6 Medicare tax withheld<br>1.81 |
| 04-3371176   | 125.00                                     | 1.01                            |
| TRIVENI SCHO 67 POWELL ST BROOKLINE                          | OOL  | <del>1</del> 6                  |
| d Control number   |  |                                 |
| e Employee's name, address, SRUTHI KAKU: 5 VILLAGE W. NATICK | LURU                                       | 01760                           |
| 7 Social security tips                                       | 8 Allocated tips                           | 9                               |
| 10 Dependent care benefits<br>. 0 0                          | 11 Nonqualified plans<br>. 0 0             | 12a Code                        |
| 13 Statutory employee 14 Oti                                 | 12b Code                                   |                                 |
| Retirement plan  | 12c Code                                   |                                 |
| Third-party sick pay   | 12d Code                                   |                                 |
| MA WTH-11719702-0  | 125.00<br>umber 16 State wages, tips, etc. | . 00                            |
| 18 Local wages, tips, etc.                                   | 19 Local income tax                        | 20 Locality name                |
| Form W-2 Wage and Tax St                                     | atement 2021                               | Dept. of the Treasury - IR      |

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