								Federal Box 1	Soc. Sec	c. Box 3 &	7 N	Medicare Box 5	
To the right is an explanation of the contents of the wage boxes on your W-2. Please note							Gross Wages 31057		7.71 31057.71 31		31057.71		
that the Gross amount shown may include adjustments.								2	0.72	2 20.72		20.72	
						Group Term Adoption	Life	_	0.72	20	.,,_	20.72	
						Deferred Co Section 125	mp		).76) 5.40)	(476.4	40)	(476.40)	
							c/Wage Limit			,	,	, ,	
	ADED							3022		.27 30602.03 30602.0  2. FEDERAL INCOME TAX WITHHELD			
D. CONTROL NUMBER 000051616001	to the Internal Rev	This Information is being furnished to the Internal Revenue Service 2021 OMB NO. 1545-0008					TIPS, OTHER CC	30221.27	3732.64			32.64	
B. EMPLOYER IDENTIFICATION NUMBER 94-3326476  A. EMPLOYEE'S SOCIAL SECURITY NUMBER 785-91-1614							ECURITY WAGI	30602.03	4. SOCIAL SECURITY TAX WITHHELD 1897.33				
C. EMPLOYER'S NAME, ADDRESS, AND ZIP CODE ExIservice.Com., LLC 10 Exchange Place Ste 2200 Jersey City NJ 07302							5. MEDICARE WAGES AND TIPS 30602.03			6. MEDICARE TAX WITHHELD 443.73			
							7. SOCIAL SECURITY TIPS			8. ALLOCATED TIPS			
							9.			10. DEPENDENT CARE BENEFITS			
E. EMPLOYEE'S FIRST NAME AND INITIAL LAST NAME SUFF.							LIFIED PLANS		12.a-d C			20.72	
Sachin Aggarwal 1800 Silas Deane Highway							TPL	153.01	D DD			380.76 1617.30	
Apt 231-S Rocky Hill CT 06067													
F. EMPLOYEE'S ADDRESS  15. STATE EMPLOYER	S AND ZIP CODE 'S STATE I.D. NO.	16. STATE WAG	TO TIDE I	TC	17. STATE INCOME	FAV	10 10001 14	/AGES, TIPS, ETC. 1	9. LOCAL INCOME	PLAN		THIRD PARTY SICK PAY	
CT 38245551		10. STATE WAG	3022		17. STATE INCOME	1480.99	18. LOCAL VI	AGES, TIPS, ETC. 1	9. LOCAL INCOME	: TAX	20. LOCAL	ITT NAME	
D. CONTROL NUMBER	This Information is	s being furnished		OMB	3 NO. 1545-0008	1. WAGES, T	TIPS, OTHER CO		2. FEDERAL INC	COME TA			
000051616001  B. EMPLOYER IDENTIFICA	to the Internal Re	A. EMPLOYEE'S	2021 SOCIAL SE			3. SOCIAL SE	ECURITY WAG	30221.27 ES	4. SOCIAL SEC	URITY T		32.64 LD	
94-3326476						30602.03 5. MEDICARE WAGES AND TIPS			1897.33 6. MEDICARE TAX WITHHELD				
Exlservice.Com, LLC 10 Exchange Place Ste 2200 Jersey City NJ 07302								30602.03				43.73	
							7. SOCIAL SECURITY TIPS			8. ALLOCATED TIPS			
						9.			10. DEPENDENT CARE BENEFITS				
E. EMPLOYEE'S FIRST NAME AND INITIAL LAST NAME SUFF. Sachin Aggarwal							LIFIED PLANS		12.a-d C D			20.72 380.76	
1800 Silas Deane Highway Apt 231-S Rocky Hill CT 06067 USA							14. OTHER CTPL 153.01			DD 1617.30  13. STATUTORY RETIREMENT X THIRD PARTY EMPLOYEE PLAN SICK PAY			
CT 38245551 Copy 2 To be filed		 e's STATE, CI			tax return	2021		Dept. of	the Treasury	- Inter	nal Reve	nue Service	
FORM W-2 Wag	e and Tax S	tatement											
D. CONTROL NUMBER 000051616001	This Information is to the Internal Rev		2021	ОМВ	NO. 1545-0008	1. WAGES, 1	TIPS, OTHER CO	MPENSATION 30221.27	2. FEDERAL INC	COME TA		D 32.64	
B. EMPLOYER IDENTIFICA 94-3326476	MPLOYER IDENTIFICATION NUMBER A. EMPLOYEE'S SOCIAL SECURITY NUMBER						3. SOCIAL SECURITY WAGES			4. SOCIAL SECURITY TAX WITHHELD 1897.33			
C. EMPLOYER'S NAME, ADDRESS, AND ZIP CODE							5. MEDICARE WAGES AND TIPS 30602.03			6. MEDICARE TAX WITHHELD 443.73			
Exiservice.Com, LLC 10 Exchange Place Ste 2200 Jersey City NJ 07302  E. EMPLOYEE'S FIRST NAME AND INITIAL LAST NAME SUFF.							7. SOCIAL SECURITY TIPS			8. ALLOCATED TIPS			
							9.			10. DEPENDENT CARE BENEFITS			
							11. NONQUALIFIED PLANS			12.a-d C 20.72			
Sachin Aggarwal							TPL	153.01	D			380.76 1617.30	
1800 Silas Deane Highway Apt 231-S Rocky Hill CT 06067								100.01					
USA F. EMPLOYEE'S ADDRESS									13. STATUTORY EMPLOYEE	PLAN		THIRD PARTY SICK PAY	
15. STATE EMPLOYER CT 38245551	'S STATE I.D. NO. -000	16. STATE WAGI	3022 3022		17. STATE INCOME	ГАХ 1480.99	18. LOCAL W	/AGES, TIPS, ETC. 1	9. LOCAL INCOME	. TAX	20. LOCAL	ITY NAME	
Copy 2 To be filed FORM <b>W-2 Wag</b>			ΓY, or L	OCAL	tax return	2021		Dept. of	the Treasury	/ - Inte	ernal Rev	enue Servic	
D. CONTROL NUMBER 000051616001	This Information is to the Internal Rev		2021	OMB	8 NO. 1545-0008	1. WAGES, T	TIPS, OTHER CO	MPENSATION 30221.27	2. FEDERAL INC	OME TA		D 32.64	
B. EMPLOYER IDENTIFICATION BY 13326476		A. EMPLOYEE'S: 785-91-1614	SOCIAL SE	CURITY N	NUMBER	3. SOCIAL SE	ECURITY WAG	ES	4. SOCIAL SEC	URITY T	AX WITHHE	LD	
C. EMPLOYER'S NAME, ADDRESS, AND ZIP CODE							30602.03 5. MEDICARE WAGES AND TIPS			6. MEDICARE TAX WITHHELD			
Exlservice.Com, LLC 10 Exchange Place Ste 2200 Jersey City NJ 07302							7. SOCIAL SECURITY TIPS			8. ALLOCATED TIPS			
							9.			10. DEPENDENT CARE BENEFITS			
E PARIONETE DOTAMAT AND HITTI							וונונף מיייי						
E. EMPLOYEE'S FIRST NAME AND INITIAL LAST NAME SUFF. Sachin Aggarwal							LIFIED PLANS		12.a-d C D			20.72 380.76	
1800 Silas Deane Highway Apt 231-S							TPL	153.01	DD			1617.30	
Rocky Hill CT 06067 USA									13. STATUTORY EMPLOYEE	RETIF	REMENT X	THIRD PARTY SICK PAY	
	LOYER'S STATE I.D. NO.   16. STATE WAGES, TIPS, ETC.   17. STATE INCOME T					TAX 1480.99	18. LOCAL W	/AGES, TIPS, ETC. 1	9. LOCAL INCOME			ITY NAME	
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