b Employer's Identification number	-26-1260542		12a See instructions for Box 12	1 Wages, tips, other compensation	2 Federal income tax withheld
c Employer's name, address, and ZIP code			\$	12000.00	1013.76
EA LEARN INC			12b	3 Social security wages	4 Social security tax withheld
EA DEAKN INC			ls		
100 MERDODIEN DDIN	GTTT TTT 1 0 2	12c	5 Medicare wages and tips	6 Medicare tax withheld	
100 METROPLEX DRIV	SULTE#103		\$		
			12d	7 Social security tips	8 Allocated tips
EDISON NJ 08817			\$		
e Employee's first name and initial	Last name			9	10 Dependent care benefits
	3411628		This information is being furnished to the Internal Revenue Service		
				11 Nongualified plans	13 Statutory Retirement Third-party employee plan sick pay
SAI KRISHNA KISHOR	L DASARI		Copy B To Be Filed with		employee plan sick pay
150 TALMADGE RD					
			Employee's FEDERAL	14 Other	56.40
			Tax Return	NJ SDI	
EDISON NJ 08817			NJ SUI EE	51.00	
			a Employee's soc. sec. no	NJ FLI	33.60
f Employee's address and ZIP code			764-49-0828		
15 State Employer's state I.D. No. 16	6 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
NJ 261-260-542/000	12000.00	320.76			
FF					
Form W-2 Wage and Tax Statement 202	21 Department of the Treasur	ry-Internal Revenue Service	OMB # 1545-0008	Copy B To Be Filed V	With Employee's FEDERAL Tax Return

<u>b Employer's Identification number</u> <u>5 Employer's Identification number</u> <u>26-1260542</u>	12a See instructions for Box 12	1 Wages, tips, other compensation	2 Federal income tax withheld
c Employer's name, address, and ZIP code 20-1200342	s	12000.00	1013.76
EA LEARN INC	12b	3 Social security wages	4 Social security tax withheld
	\$		
100 METROPLEX DRIVE SUITE#103	12c	5 Medicare wages and tips	6 Medicare tax withheld
100 MEIROPHER DRIVE SOTTE#105	\$		
EDIGON NI 0001E	12d	7 Social security tips	8 Allocated tips
EDISON NJ 08817	\$		
e Employee's first name and initial Last name	1	9	10 Dependent care benefits
3411628			
	Come O for Otato Otto on	11 Nonqualified plans	13 Statutory Retirement Third-party employee plan sick pay
SAI KRISHNA KISHORE DASARI	Copy 2 for State, City, or		employee plan sick pay
150 TALMADGE RD	Local Tax Departments	14 Other	
		NJ SDI	56.40
		NJ SUI EE	51.00
EDISON NJ 08817	a Employee's soc. sec. no	NJ FLI	33.60
f Employee's address and ZIP code	764-49-0828		
15 State Employer's state I.D. No. 16 State wages, tips, etc. 17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
NJ 261-260-542/000 12000.00 320.76		L	
Form W-2 Wage and Tax Statement 2021 Department of the Treasury-Internal Revenue Service	OMB # 1545-0008	Copy 2 To Be Filed With Employee's STA	ATE, CITY, or LOCAL Tax Departments

REV 01/06/22 OSP

b Employer's Identification number c Employer's name address and ZIP code 26-1260542	12a See instructions for Box 12	1 Wages, tips, other compensation	
c Employer's name, address, and ZIP code	\$	12000.00	1013.76
EA LEARN INC	12b	3 Social security wages	4 Social security tax withheld
	ls		
	12c	5 Medicare wages and tips	6 Medicare tax withheld
100 METROPLEX DRIVE SUITE#103	\$		
	12d	7 Social security tips	8 Allocated tips
EDISON NJ 08817	1\$		
e Employee's first name and initial Last name		9	10 Dependent care benefits
3411628			
SAI KRISHNA KISHORE DASARI	Copy 2 for State, City, or	11 Nongualified plans	13 Statutory Retirement Third-party employee plan sick pay
			employee plan sick pay
150 TALMADGE RD	Local Tax Departments	14 Other	
		NJ SDI	56.40
EDISON NJ 08817		NJ SUI EE	51.00
EDISON NO COCI	a Employee's soc. sec. no	NJ FLI	33.60
f Employee's address and ZIP code	764-49-0828		
15 State Employer's state I.D. No. 16 State wages, tips, etc. 17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
NJ 261-260-542/000 12000.00 320.76			
Form W-2 Wage and Tax Statement 2021 Department of the Treasury-Internal Revenue Service	OMB # 1545-0008	Copy 2 To Be Filed With Employee's ST	ATE, CITY, or LOCAL Tax Departments

b Employer's Identification number 26-1260542		12a See instructions for Box 12	1 Wages, tips, other compensation	2 Federal income tax withheld	
c Employer's name, address, and ZIP code	ode 20 1200012		\$	12000.00	1013.76
EA LEARN INC	<u> </u>		12b	3 Social security wages	4 Social security tax withheld
			\$		
			12c	5 Medicare wages and tips	6 Medicare tax withheld
100 METROPLEX DRIVE SUITE#103			\$		
			12d	7 Social security tips	8 Allocated tips
EDISON NJ 08817			\$		
e Employee's first name and initial	Last name		This information is being furnished to the	9	10 Dependent care benefits
	3411628		Internal Revenue Service. If you are required to file a tax return, a negligence		
SAI KRISHNA KISHOF	RE DASARI			11 Nonqualified plans	13 Statutory Retirement Third-party employee plan sick pay
150 TALMADGE RD					
			Copy C for Employee's Records (see notice to	14 Other NJ SDI	F.C. 40
			Employee on back.)		56.40
EDISON NJ 08817			NJ SUI EE	51.00	
			a Employee's soc. sec. no	NJ FLI	33.60
f Employee's address and ZIP code			764-49-0828		
	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
NJ 261-260-542/000	12000.00	320.76			

Form W-2 Wage and Tax Statement 2021 Department of the Treasury-Internal Revenue Service