

b Employer's Identification number c Employer's name, address, and ZIP code		37-1565019 TELECROSS LABS, INC 169 DANIEL WEBSTER HWY SUITE # 106 NASHUA NH 03060		12a See instructions for Box 12	1 Wages, tips, other compensation	2 Federal income tax withheld
				\$	21704.25	2437.44
				12b	3 Social security wages	4 Social security tax withheld
				\$	21704.25	1345.66
				12c	5 Medicare wages and tips	6 Medicare tax withheld
				\$	21704.25	314.71
				12d	7 Social security tips	8 Allocated tips
				\$		
e Employee's first name and initial Last name		3224991		9		10 Dependent care benefits
SRINIVAS REDDY DENDI 5461 MOLINO IRVINE CA 92618				11 Nonqualified plans		13 Statutory employee Retirement plan Third-party sick pay
f Employee's address and ZIP code				14 Other		CA SDI 260.45
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
CA	816-6619-0	21704.25	1014.27			

Form W-2 Wage and Tax Statement 2021 Department of the Treasury-Internal Revenue Service OMB # 1545-0008 Copy B To Be Filed With Employee's FEDERAL Tax Return

b Employer's Identification number c Employer's name, address, and ZIP code		37-1565019 TELECROSS LABS, INC 169 DANIEL WEBSTER HWY SUITE # 106 NASHUA NH 03060		12a See instructions for Box 12	1 Wages, tips, other compensation	2 Federal income tax withheld
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CA	816-6619-0	21704.25	1014.27			

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 STATE, CITY, or LOCAL Tax Departments

REV 01/06/22 OSP

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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 STATE, CITY, or LOCAL Tax Departments

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Form W-2 Wage and Tax Statement 2021 Department of the Treasury-Internal Revenue Service OMB # 1545-0008 Copy C For Employee's Records