b Employer's Identification number	16 5401700	12a See instructions for Box 12	1 Wages, tips, other compensation	2 Federal income tax withheld
c Employer's name, address, and ZIP cod	46-5491792	le	74343.46	5882.00
		12b	3 Social security wages	4 Social security tax withheld
DATAQUEST CORP		le le	74343.46	4609.29
		13 12c	5 Medicare wages and tips	6 Medicare tax withheld
825 GEORGES RD		is is	74343.46	1077.98
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NORTH BRUNSWICK NJ	08902	le.		
e Employee's first name and initial	Last name	19	9 Verification code	10 Dependent care benefits
	334008286	This information is being furnished to the Internal Revenue Service		
_	334000200	internal Revenue Service	11 Nonqualified plans	13 Statutory Retirement Third-party
NARENDAR PASULETI		Carry B. To Bo Filed with		13 Statutory Retirement Third-party employee plan sick pay
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APT # 112		Employee's FEDERAL	14 Other	
••		Tax Return		
MORRRISVILLE NC 275	060-9247	a Employee's soc. sec. no		
		771-41-5980		
f Employee's address and ZIP code	State wages, tips, etc. RHISState in Dans tal TEMENT	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
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Form W-2 Wage and Tax Statement 2.0.1	O Department of the Treasury-Internal Revenue Service	OMB # 1545-0008	Copy B To Be Filed V	With Employee's FEDERAL Tax Return
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b Familian de Idantification accessor		42a Cas instructions for Bay 42	la w	0.5-4
b Employer's Identification number c Employer's name, address, and ZIP cod	46-5491792	12a See instructions for Box 12	1 Wages, tips, other compensation	
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REV 12/23/19 OSP	1.5 510150	12a See instructions for Box 12	1 Wages, tips, other compensation	2 Federal income tax withheld
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MORRRISVILLE NC 275	060-9247	a Employee's soc. sec. no		
f Employee's address and 7ID ands	REISSUED STATEMENT	771-41-5980	Ť	
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Form W-2 Wage and Tax Statement 201	9 Department of the Treasury-Internal Revenue Service	OMB # 1545-0008	Copy 2 To Be Filed With Employee's STA	ATE, CITY, or LOCAL Tax Department
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b Employer's Identification number c Employer's name, address, and ZIP cod	46-5491792	12a See instructions for Box 12	1 Wages, tips, other compensation	2 Federal income tax withheld
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e Employee's first name and initial	Last name	This information is being furnished to the	9 Verification code	10 Dependent care benefits
	334008286	Internal Revenue Service. If you are required to file a tax return, a negligence		
NARENDAR PASULETI		penalty or other sanction may be imposed on you if this income is taxable and you	11 Nonqualified plans	13 Statutory Retirement Third-party employee plan sick pay
		on you if this income is taxable and you fail to report it.		employee plan sick pay
STATION DR		Copy C for Employee's	14 Other	
APT # 112	REISSUED STATEMENT	Records (see notice to		
MORRRISVILLE NC 275		Employee on back.)		
MOUNTLY VILLE INC 2/3	JUU JAT!	a Employee's soc. sec. no		
f Employee's address and ZIP code		771-41-5980		
15 State Employer's state I.D. No. 16		18 Local wages, tips, etc.	19 Local income tax	20 Locality name
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