

		a Employee's social security number 855-23-6287	OMB No. 1545-0008				This information is being furnished to the Internal Revenue Service. If you are required to file a tax return, a negligence penalty or other sanction may be imposed on you if this income is taxable and you fail to report it.	
b Employer identification number (EIN) 47-1004047			1 Wages, tips, other compensation 15550.00		2 Federal income tax withheld 1305.39			
c Employer's name, address, and ZIP code ASPYRETECH INC 4137 MEXICO ROAD ST PETERS MO 63376			3 Social security wages		4 Social security tax withheld			
			5 Medicare wages and tips		6 Medicare tax withheld			
			7 Social security tips		8 Allocated tips			
d Control number			9		10 Dependent care benefits			
e Employee's first name and initial Last name Suff. VINEESHA PEDDI 457 SETON HALL CT VALLEY PARK MO 63088			11 Nonqualified plans		12a See instructions for box 12			
			13 Statutory employee Retirement plan Third-party sick pay <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		12b			
			14 Other		12c			
					12d			
f Employee's address and ZIP code								
15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name		
MO	23215691	15550.00	552.00	15550.00	155.50	STLOU		

Form **W-2** Wage and Tax Statement
Copy C—For EMPLOYEE'S RECORDS
(See *Notice to Employee* on the back of Copy B.)

2021

Department of the Treasury—Internal Revenue Service

Safe, accurate, FAST! Use 

		a Employee's social security number 855-23-6287	OMB No. 1545-0008					
b Employer identification number (EIN) 47-1004047			1 Wages, tips, other compensation 15550.00		2 Federal income tax withheld 1305.39			
c Employer's name, address, and ZIP code ASPYRETECH INC 4137 MEXICO ROAD ST PETERS MO 63376			3 Social security wages		4 Social security tax withheld			
			5 Medicare wages and tips		6 Medicare tax withheld			
			7 Social security tips		8 Allocated tips			
d Control number			9		10 Dependent care benefits			
e Employee's first name and initial Last name Suff. VINEESHA PEDDI 457 SETON HALL CT VALLEY PARK MO 63088			11 Nonqualified plans		12a			
			13 Statutory employee Retirement plan Third-party sick pay <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		12b			
			14 Other		12c			
					12d			
f Employee's address and ZIP code								
15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name		
MO	23215691	15550.00	552.00	15550.00	155.50	STLOU		

Form **W-2** Wage and Tax Statement
**Copy 2—To Be Filed With Employee's State, City, or Local
Income Tax Return**

2021

Department of the Treasury—Internal Revenue Service