



**W-2** Wage and Tax Statement  
 Employee Reference Copy  
**2021**  
 OMB No. 1545-0008  
 Copy C for employee's records.

d Control number 000223 Dept. RZ/KMH Corp. Employer use only 74

c Employer's name, address, and ZIP code  
**BI LABS INC**  
**517 ROUTE 1 S**  
**SUITE 1116**  
**ISELIN, NJ 08830**  
 Batch #91704

e/f Employee's name, address, and ZIP code  
**SAI MONISH PAMURI**  
**2098 155TH PL NE**  
**APT B426**  
**BELLEVUE, WA 98007**

b Employer's FED ID number 36-4839838 a Employee's SSA number XXX-XX-0280

1 Wages, tips, other comp. 28320.00 2 Federal income tax withheld 5065.05

3 Social security wages 28320.00 4 Social security tax withheld 1755.84

5 Medicare wages and tips 28320.00 6 Medicare tax withheld 410.64

7 Social security tips 8 Allocated tips

9 10 Dependent care benefits

11 Nonqualified plans 12a See instructions for box 12

14 Other 12b 12c 12d 13 Stat emp Ret. plan 3rd party sick pay

15 State Employer's state ID no. 16 State wages, tips, etc.

17 State income tax 18 Local wages, tips, etc.

19 Local income tax 20 Locality name

This blue section is your Earnings Summary which provides more detailed information on the generation of your W-2 statement. The reverse side includes instructions and other general information.

1. Your Gross Pay was adjusted as follows to produce your W-2 Statement.

	Wages, Tips, other Compensation Box 1 of W-2	Social Security Wages Box 3 of W-2	Medicare Wages Box 5 of W-2
Gross Pay	28,320.00	28,320.00	28,320.00
Reported W-2 Wages	28,320.00	28,320.00	28,320.00

2. Employee Name and Address.

**SAI MONISH PAMURI**  
**2098 155TH PL NE**  
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**BELLEVUE, WA 98007**

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**W-2** Wage and Tax Statement  
 Federal Filing Copy  
**2021**  
 OMB No. 1545-0008  
 Copy B to be filed with employee's Federal Income Tax Return.

d Control number 000223 Dept. RZ/KMH Corp. Employer use only 74

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**BI LABS INC**  
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**W-2** Wage and Tax Statement  
 State Reference Copy  
**2021**  
 OMB No. 1545-0008  
 Copy 2 to be filed with employee's State Income Tax Return.

d Control number 000223 Dept. RZ/KMH Corp. Employer use only 74

c Employer's name, address, and ZIP code  
**BI LABS INC**  
**517 ROUTE 1 S**  
**SUITE 1116**  
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**W-2** Wage and Tax Statement  
 City or Local Reference Copy  
**2021**  
 OMB No. 1545-0008  
 Copy 2 to be filed with employee's City or Local Income Tax Return.

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**BI LABS INC**  
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