

Form **W-2 Wage and Tax Statement** 2021

c Employer's name, address, and ZIP code  
**ARTECH LLC**  
 360 MT. KEMBLE AVENUE, SUITE 2000  
 MORRISTOWN NJ 07960

e Employee's name, address, and ZIP code  
**ANUHYA JAMILI**  
 630 SHERIDAN ROAD  
 HIGHWOOD IL 60040

7 Social security tips		1 Wages, tips, other comp. 65165.84		2 Federal income tax withheld 9562.86		
8 Allocated tips		3 Social security wages 17040.00		4 Social security tax withheld 1056.48		
9		5 Medicare wages and tips 17040.00		6 Medicare tax withheld 247.08		
10 Dependent care benefits		11 Nonqualified plans		12a See instructions for box 12 D 1706.16		
13 Statutory employee Retirement plan Third-party sick pay <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>		14 Other		12b		
b Employer identification number (EIN) 22-3338103				12c		
a Employee's social security no. 838-46-7735				12d		
15 State IL	Employer's state I.D. no. 22-3338103 000 3	16 State wages, tips, etc. 65165.84	17 State income tax 3225.69	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

**Copy B To Be Filed With Employee's FEDERAL Tax Return** This information is being furnished to the Internal Revenue Service. **Dept. of the Treasury - IRS**  
 OMB No. 1545-0008 Visit the IRS Web Site at [www.irs.gov/efile](http://www.irs.gov/efile)

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.

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**Copy C For EMPLOYEE'S RECORDS (See Notice to Employee on back of Copy B)** OMB No. 1545-0008 **Dept. of the Treasury - IRS**

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