b Employer's Identification number 47-5001357	12a See instructions for Box 12	1 Wages, tips, other compensation	
c Employer's name, address, and ZIP code	\$	101666.71	13761.90
CONTRIVE SOLUTIONS INC	12b	<u>3 Social security wages</u> 101666.71	4 Social security tax withheld 6303.34
	12c	5 Medicare wages and tips	6 Medicare tax withheld
367 WEST MAIN ST,	\$	101666.71	1474.17
SUITE L2 NORTHBOROUGH MA 01532	12d	7 Social security tips	8 Allocated tips
e Employee's first name and initial Last name	\$	9	10 Dependent care benefits
5965671	This information is being furnished to the Internal Revenue Service		
ARPANA JAISWAL		11 Nonqualified plans	13 Statutory Retirement Third-party employee plan sick pay
55 S VALLEY RD, UNIT H 03	Copy B To Be Filed with		
	Employee's FEDERAL	<b>14 Other</b> PA SUI EE	61.00
PAOLI PA 19301	Tax Return		01100
FROM FR 19301	a Employee's soc. sec. no		
f Employee's address and ZIP code	700-93-7688		20 Lessity name
15 State         Employer's state I.D. No.         16 State wages, tips, etc.         17 State income tax           PA         20041916         101666.71         3261.21	18 Local wages. tips. etc. 81666.70	19 Local income tax 816.70	20 Locality name
	20000.01	200.01	21
Form W-2 Wage and Tax Statement 2021 Department of the Treasury-Internal Revenue Service	OMB # 1545-0008	Copy B To Be Filed V	Vith Employee's FEDERAL Tax Return
b Employer's Identification number	12a See instructions for Box 12	1 Wages, tips, other compensation	2 Federal income tax withheld
c Employer's name, address, and ZIP code 47-5001357	ls	101666.71	13761.90
CONTRIVE SOLUTIONS INC	12b	3 Social security wages	4 Social security tax withheld
	\$	101666.71	6303.34
367 WEST MAIN ST,	12c	5 Medicare wages and tips 101666.71	6 Medicare tax withheld 1474.17
SUITE L2	12d	7 Social security tips	14/4.1/ 8 Allocated tips
NORTHBOROUGH MA 01532	IS		
e Employee's first name and initial Last name		9	10 Dependent care benefits
5965671		11 Nongualified plans	10
ARPANA JAISWAL	Copy 2 for State, City, or		13 Statutory Retirement Third-party plan sick pay
55 S VALLEY RD, UNIT H 03	Local Tax Departments	14 Other	
		PA SUI EE	61.00
PAOLI PA 19301			
	a Employee's soc. sec. no		
f Employee's address and ZIP code 15 State Employer's state I.D. No. 16 State wages, tips, etc. 17 State income tax	700-93-7688 18 Local wages, tips, etc.	19 Local income tax	20 Locality name
PA 20041916 101666.71 3261.21	81666.70	816.70	
Form W 2 Wago and Tay Statement Department of the Traceury Internal Poyonus Service	<u>20000.01</u> OMB # 1545-0008	Copy 2 To Be Filed With Employee's STA	21
Form W-2 Wage and Tax Statement 2021 Department of the Treasury-Internal Revenue Service	OMB # 1545-0008	Copy 2 to be Flied with Employee's STA	ATE, CITT, OF LOCAL TAX Departments
REV 01/06/22 OSP	12a See instructions for Box 12	1 Warres tins other compensation	2 Federal income tax withheld
REV 01/06/22 OSP <b>b</b> Employer's Identification number <b>c</b> Employer's name, address, and ZIP code 47-5001357	12a See instructions for Box 12	1 Wages, tips, other compensation 101666.71	
b Employer's Identification number c Employer's name, address, and ZIP code	12a See instructions for Box 12 \$ 12b		2 Federal income tax withheld 13761.90 4 Social security tax withheld
b Employer's Identification number	\$  2b  \$	101666.71 3 Social security wages 101666.71	13761.90 <b>4 Social security tax withheld</b> 6303.34
b Employer's Identification number c Employer's name, address, and ZIP code	\$  12b  \$  12c	101666.71 3 Social security wages 101666.71 5 Medicare wages and tips	13761.90 4 Social security tax withheld 6303.34 6 Medicare tax withheld
b Employer's Identification number c Employer's name, address, and ZIP code CONTRIVE SOLUTIONS INC	\$  2b  \$	101666.71 3 Social security wages 101666.71	13761.90 <b>4 Social security tax withheld</b> 6303.34
b Employer's Identification number c Employer's name, address, and ZIP code CONTRIVE SOLUTIONS INC 367 WEST MAIN ST, SUITE L2 NORTHBOROUGH MA 01532	\$  12b  \$  12c  \$	<u>101666.71</u> <u>3 Social security wages</u> <u>101666.71</u> <u>5 Medicare wages and tips</u> <u>101666.71</u>	13761.90 4 Social security tax withheld 6 303.34 6 Medicare tax withheld 1474.17 8 Allocated tips
b Employer's Identification number c Employer's name, address, and ZIP code CONTRIVE SOLUTIONS INC 367 WEST MAIN ST, SUITE L2 NORTHBOROUGH MA 01532 e Employee's first name and initial Last name	\$  12b  12c  \$  12d	<u>101666.71</u> <u>3 Social security wages</u> <u>101666.71</u> <u>5 Medicare wages and tips</u> <u>101666.71</u>	13761.90 4 Social security tax withheld 6303.34 6 Medicare tax withheld 1474.17
b Employer's Identification number c Employer's name, address, and ZIP code 47-5001357 CONTRIVE SOLUTIONS INC 367 WEST MAIN ST, SUITE L2 NORTHBOROUGH MA 01532 e Employee's first name and initial Last name 5965671	\$  12b  12c  \$  12d	101666.71 3 Social security wages 101666.71 5 Medicare wages and tips 101666.71 7 Social security tips 9	13761.90 4 Social security tax withheld 6303.34 6 Medicare tax withheld 1474.17 8 Allocated tips 10 Dependent care benefits
b Employer's Identification number c Employer's name, address, and ZIP code CONTRIVE SOLUTIONS INC 367 WEST MAIN ST, SUITE L2 NORTHBOROUGH MA 01532 e Employee's first name and initial Last name	\$ 12b  \$ 12c  \$ 12d  \$ Copy 2 for State, City, or	<u>101666.71</u> <u>3 Social security wages</u> <u>101666.71</u> <u>5 Medicare wages and tips</u> <u>101666.71</u>	13761.90 4 Social security tax withheld 6 303.34 6 Medicare tax withheld 1474.17 8 Allocated tips
b Employer's Identification number c Employer's name, address, and ZIP code 47-5001357 CONTRIVE SOLUTIONS INC 367 WEST MAIN ST, SUITE L2 NORTHBOROUGH MA 01532 e Employee's first name and initial Last name 5965671	\$  12b  \$ 12c  \$ 12d  \$	101666.71 3 Social security wages 101666.71 5 Medicare wages and tips 101666.71 7 Social security tips 9	13761.90 4 Social security tax withheld 6303.34 6 Medicare tax withheld 1474.17 8 Allocated tips 10 Dependent care benefits 13 Staylory Retirement Third-party
b Employer's Identification number c Employer's name, address, and ZIP code CONTRIVE SOLUTIONS INC 367 WEST MAIN ST, SUITE L2 NORTHBOROUGH MA 01532 e Employee's first name and initial Last name 5965671 ARPANA JAISWAL	\$ 12b  \$ 12c  \$ 12d  \$ Copy 2 for State, City, or	101666.71 3 Social security wages 101666.71 5 Medicare wages and tips 101666.71 7 Social security tips 9	13761.90 4 Social security tax withheld 6303.34 6 Medicare tax withheld 1474.17 8 Allocated tips 10 Dependent care benefits 13 Staylory Retirement Third-party
b Employer's Identification number c Employer's name, address, and ZIP code CONTRIVE SOLUTIONS INC 367 WEST MAIN ST, SUITE L2 NORTHBOROUGH MA 01532 e Employee's first name and initial Last name 5965671 ARPANA JAISWAL	\$ 12b  \$ 12c  \$ 12d  \$ Copy 2 for State, City, or Local Tax Departments	101666.71 3 Social security wages 101666.71 5 Medicare wages and tips 101666.71 7 Social security tips 9 11 Nongualified plans	13761.90 4 Social security tax withheld 6 303.34 6 Medicare tax withheld 1474.17 8 Allocated tips 10 Dependent care benefits 13 Statutory employee Retirement Third-party plan Statutory
b Employer's Identification number c Employer's name, address, and ZIP code 47-5001357 CONTRIVE SOLUTIONS INC 367 WEST MAIN ST, SUITE L2 NORTHBOROUGH MA 01532 e Employee's first name and initial Last name 5965671 ARPANA JAISWAL 55 S VALLEY RD, UNIT H 03 PAOLI PA 19301	\$ 12b  \$ 12c  \$ 12d  \$ Copy 2 for State, City, or Local Tax Departments a Employee's soc. sec. no	101666.71 3 Social security wages 101666.71 5 Medicare wages and tips 101666.71 7 Social security tips 9 11 Nongualified plans	13761.90 4 Social security tax withheld 6 303.34 6 Medicare tax withheld 1474.17 8 Allocated tips 10 Dependent care benefits 13 Statutory employee Retirement Third-party plan Statutory
b Employer's Identification number c Employer's name, address, and ZIP code CONTRIVE SOLUTIONS INC 367 WEST MAIN ST, SUITE L2 NORTHBOROUGH MA 01532 e Employee's first name and initial Last name 5965671 ARPANA JAISWAL 55 S VALLEY RD, UNIT H 03 PAOLI PA 19301 f Employee's address and ZIP code 15 State   Employee's state LD. No. 16 State wages, tips, etc.  17 State income tax	\$ 12b  \$ 12c  \$ 12d  \$ Copy 2 for State, City, or Local Tax Departments a Employee's soc. sec. no 700 - 93 - 7688	101666.71 3 Social security wages 101666.71 5 Medicare wages and tips 101666.71 7 Social security tips 9 11 Nongualified plans 14 Other PA SUI EE 19 Local income tax	13761.90 4 Social security tax withheld 6 303.34 6 Medicare tax withheld 1474.17 8 Allocated tips 10 Dependent care benefits 13 Statutory Retirement Third-party plan 61.00 20 Locality name
b Employer's Identification number c Employer's name, address, and ZIP code 47-5001357 CONTRIVE SOLUTIONS INC 367 WEST MAIN ST, SUITE L2 NORTHBOROUGH MA 01532 e Employee's first name and initial Last name 5965671 ARPANA JAISWAL 55 S VALLEY RD, UNIT H 03 PAOLI PA 19301 f Employee's address and ZIP code	\$ 12b  \$ 12c  \$ 12d  \$ Copy 2 for State, City, or Local Tax Departments a Employee's soc. sec. no 700-93-7688 18 Local wages. tips. etc. 81.666.70	101666.71 3 Social security wages 101666.71 5 Medicare wages and tips 101666.71 7 Social security tips 9 11 Nongualified plans 14 Other PA SUI EE 19 Local income tax 816.70	13761.90 4 Social security tax withheld 6 303.34 6 Medicare tax withheld 1474.17 8 Allocated tips 10 Dependent care benefits 13 Statutory plan Third-party plan Third-party plan 61.00 20 Locality name 21
b Employer's Identification number c Employer's name, address, and ZIP code 47-5001357 CONTRIVE SOLUTIONS INC 367 WEST MAIN ST, SUITE L2 NORTHBOROUGH MA 01532 e Employee's first name and initial Last name 5965671 ARPANA JAISWAL 55 S VALLEY RD, UNIT H 03 PAOLI PA 19301 f Employee's address and ZIP code 15 State Employer's state I.D. No. 16 State wages. tips. etc. 17 State income tax PA 20041916 101666.71 3261.21.	\$ 12b  \$ 12c  \$ 12d  \$ Copy 2 for State, City, or Local Tax Departments a Employee's soc. sec. no 700 - 93 - 7688	101666.71 3 Social security wages 101666.71 5 Medicare wages and tips 101666.71 7 Social security tips 9 11 Nongualified plans 14 Other PA SUI EE 19 Local income tax	13761.90 4 Social security tax withheld 6 303.34 6 Medicare tax withheld 1474.17 8 Allocated tips 10 Dependent care benefits 13 Statutory Palan Find-party Statutory Palan 61.00 20 Locality name 21 21
b Employer's Identification number c Employer's name, address, and ZIP code CONTRIVE SOLUTIONS INC 367 WEST MAIN ST, SUITE L2 NORTHBOROUGH MA 01532 e Employee's first name and initial Last name 5965671 ARPANA JAISWAL 55 S VALLEY RD, UNIT H 03 PAOLI PA 19301 f Employee's address and ZIP code 15 State   Employee's state LD. No. 16 State wages, tips, etc.  17 State income tax	\$ 12b  \$ 12c  \$ 12d  \$ Copy 2 for State, City, or Local Tax Departments a Employee's soc. sec. no 700-93-7688 18 Local wages, tips, etc. 8 1666.70 20000.01	101666.71 3 Social security wages 101666.71 5 Medicare wages and tips 101666.71 7 Social security tips 9 11 Nongualified plans 14 Other PA SUI EE 19 Local income tax 816.70 200.01	13761.90 4 Social security tax withheld 6 303.34 6 Medicare tax withheld 1474.17 8 Allocated tips 10 Dependent care benefits 13 Statutory Palan Fill Statutory Care Statution 14 74.17 8 Allocated tips 10 Dependent Care benefits 13 Statutory Care Statution 6 1.00 20 Locality name 21 21
b Employer's Identification number c Employer's name, address, and ZIP code CONTRIVE SOLUTIONS INC 367 WEST MAIN ST, SUITE L2 NORTHBOROUGH MA 01532 ie Employee's first name and initial Last name 5965671 ARPANA JAISWAL 55 S VALLEY RD, UNIT H 03 PAOLI PA 19301 f Employee's address and ZIP code 15 State Employer's state I.D. No. 16 State wages, tips, etc. 17 State income tax PA 20041916 101666.71 3261.21 Form W-2 Wage and Tax Statement 2021 Department of the Treasury-Internal Revenue Service	\$ 12b  \$ 12c  \$ 12d  \$ Copy 2 for State, City, or Local Tax Departments a Employee's soc. sec. no 700-93-7688 18 Local wages, tips, etc. 81666.70 81666.70 81666.70 81666.70 81666.70 	101666.71         3 Social security wages         101666.71         5 Medicare wages and tips         101666.71         7 Social security tips         9         11 Nongualified plans         14 Other         PA SUI EE         19 Local income tax	13761.90 4 Social security tax withheld 6 303.34 6 Medicare tax withheld 1474.17 8 Allocated tips 10 Dependent care benefits 13 Statutory Retirement Third-party plan Statutory 61.00 20 Locality name 21 21 THE, CITY, or LOCAL Tax Departments
b Employer's Identification number c Employer's name, address, and ZIP code 47-5001357 CONTRIVE SOLUTIONS INC 367 WEST MAIN ST, SUITE L2 NORTHBOROUGH MA 01532 e Employee's first name and initial Last name 5965671 ARPANA JAISWAL 55 S VALLEY RD, UNIT H 03 PAOLI PA 19301 f Employee's address and ZIP code 15 State Employer's state I.D. No. 16 State wages, tips, etc. 17 State income tax PA_ 20041916101666.71	\$ 12b  \$ 12c  \$ 12d  \$ Copy 2 for State, City, or Local Tax Departments a Employee's soc. sec. no 700-93-7688 18 Local wages, tips, etc. 81666.70 81666.70 81666.70 81666.70 81666.70 	101666.71           3 Social security wages           101666.71           5 Medicare wages and tips           101666.71           7 Social security tips           9           11 Nongualified plans           14 Other           PA SUI EE           19 Local income tax           816.70           200.01           Copy 2 To Be Filed With Employee's ST/           1 Wages, tips, other compensation	13761.90         4 Social security tax withheld         6303.34         6 Medicare tax withheld         1474.17         8 Allocated tips         10 Dependent care benefits         13 Statutory plan         Participanty plan         61.00         20 Locality name         21         22         23         24         25         26         36         37         37         37         37         37
b Employer's Identification number c Employer's name, address, and ZIP code 47-5001357 CONTRIVE SOLUTIONS INC 367 WEST MAIN ST, SUITE L2 NORTHBOROUGH MA 01532 e Employee's first name and initial Last name 5965671 ARPANA JAISWAL 55 S VALLEY RD, UNIT H 03 PAOLI PA 19301 f Employee's address and ZIP code 15 State Employer's state I.D. No. 16 State wages. tips. etc. 17 State income tax PA 20041916 101666.71 3261.21. Form W-2 Wage and Tax Statement 2021 Department of the Treasury-Internal Revenue Service	\$ 12b  \$ 12c  \$ 12d  \$ Copy 2 for State, City, or Local Tax Departments a Employee's soc. sec. no 700-93-7688 18 Local wages, tips, etc. 81666.70 81666.70 81666.70 81666.70 81666.70 	101666.71           3 Social security wages           101666.71           5 Medicare wages and tips           101666.71           7 Social security tips           9           11 Nongualified plans           14 Other           PA SUL EE           19 Local income tax	13761.90         4 Social security tax withheld         6303.34         6 Medicare tax withheld         1474.17         8 Allocated tips         10 Dependent care benefits         13 Statutory plan         1474.17         61.00         20 Locality name         21         31         21         31         21         31         31         31         32         33         34         37         37         37         37         37         37         37         37 <tr< td=""></tr<>
b Employer's Identification number c Employer's name, address, and ZIP code CONTRIVE SOLUTIONS INC 367 WEST MAIN ST, SUITE L2 NORTHBOROUGH MA 01532 e Employee's first name and initial Last name 5965671 ARPANA JAISWAL 55 S VALLEY RD, UNIT H 03 PAOLI PA 19301 f Employee's address and ZIP code 15 State Employer's state I.D. No. 16 State wages, tips, etc. 17 State income tax PA 20041916 101666.71 3261.21. Form W-2 Wage and Tax Statement 2021 Department of the Treasury-Internal Revenue Service	\$ 12b  \$ 12c  \$ 12d  \$ Copy 2 for State, City, or Local Tax Departments a Employee's soc. sec. no 700-93-7688 18 Local wages. tips. etc. <u>81666.70</u> <u>81666.70</u> <u>81666.70</u> 10 MB # 1545-0008 12a See instructions for Box 12  \$ 12b	101666.71           3 Social security wages           101666.71           5 Medicare wages and tips           101666.71           7 Social security tips           9           11 Nongualified plans           14 Other           PA SUI EE           19 Local income tax           816.70           200.01           Copy 2 To Be Filed With Employee's ST/           1 Wages, tips, other compensation	13761.90         4 Social security tax withheld         6303.34         6 Medicare tax withheld         1474.17         8 Allocated tips         10 Dependent care benefits         13 Statutory plan         Participanty plan         61.00         20 Locality name         21         22         23         24         25         26         36         37         37         37         37         37
b Employer's Identification number c Employer's name, address, and ZIP code 47-5001357 CONTRIVE SOLUTIONS INC 367 WEST MAIN ST, SUITE L2 NORTHBOROUGH MA 01532 c Employee's first name and initial Last name 5965671 ARPANA JAISWAL 55 S VALLEY RD, UNIT H 03 PAOLI PA 19301 f Employee's address and ZIP code 15 State Employer's state I.D. No. 16 State wages, tips, etc. 17 State income tax PA 20041916 101666.71 3261.21. Form W-2 Wage and Tax Statement 2021 Department of the Treasury-Internal Revenue Service b Employer's Identification number c Employer's Identification number c Employer's Identification number c Employer's Identification Number CONTRIVE SOLUTIONS INC	\$ 12b  \$ 12c  \$ 12d  \$ Copy 2 for State, City, or Local Tax Departments a Employee's soc. sec. no 700-93-7688 18 Local wages. tips. etc. 	101666.71           3 Social security wages           101666.71           5 Medicare wages and tips           101666.71           7 Social security tips           9           11 Nongualified plans           14 Other           PA SUI EE           19 Local income tax           200.01           Copy 2 To Be Filed With Employee's ST/           1 Wages. tips. other compensation           101666.71           3 Social security wages           101666.71           5 Medicare wages and tips	13761.90 4 Social security tax withheld 6 303.34 6 Medicare tax withheld 1474.17 8 Allocated tips 10 Dependent care benefits 13 Statutory Comparison 14 Third-party plan 13 Statutory Comparison 14 Third-party plan 61.00 20 Locality name 21 21 ATE, CITY, or LOCAL Tax Departments 2 Federal income tax withheld 13761.90 4 Social security tax withheld
b Employer's Identification number c Employer's name, address, and ZIP code 47-5001357 CONTRIVE SOLUTIONS INC 367 WEST MAIN ST, SUITE L2 NORTHBOROUGH MA 01532 c Employee's first name and initial Last name 5965671 ARPANA JAISWAL 55 S VALLEY RD, UNIT H 03 PAOLI PA 19301 f Employee's address and ZIP code 15 State Employer's state I.D. No. 16 State wages, tips, etc. 17 State income tax PA 20041916 	\$ 12b  \$ 12c  \$ 12d  \$ Copy 2 for State, City, or Local Tax Departments a Employee's soc. sec. no 700-93-7688 18 Local wages, tips, etc. 81666.70 81666.70 81666.70 81666.70 81666.70 81666.70 81666.70 	101666.71           3 Social security wages           101666.71           5 Medicare wages and tips           101666.71           7 Social security tips           9           11 Nongualified plans           14 Other           PA SUI EE           19 Local income tax           200.01           Copy 2 To Be Filed With Employee's ST/           1 Wages, tips, other compensation           101666.71           3 Social security wages           101666.71           5 Medicare wages and tips           101666.71	13761.90 4 Social security tax withheld 6 303.34 6 Medicare tax withheld 1474.17 8 Allocated tips 10 Dependent care benefits 13 Statutory Retirement Third-party plan Third-party 61.00 20 Locality name 21 21 3 Cocality name 21 21 3 Cocality name 21 21 3 Cocality name 21 3 Cocality name 3 Co
b Employer's Identification number c Employer's name, address, and ZIP code 367 WEST MAIN ST, SUITE L2 NORTHBOROUGH MA 01532 e Employee's first name and initial Last name 5965671 ARPANA JAISWAL 55 S VALLEY RD, UNIT H 03 PAOLI PA 19301 f Employee's address and ZIP code 15 State Employer's state LD. No. 16 State wages, tips, etc. 17 State income tax PA 20041916 101666.71 3261.21. Form W-2 Wage and Tax Statement 2021 Department of the Treasury-Internal Revenue Service b Employer's Identification number c Employer's name, address, and ZIP code 367 WEST MAIN ST, SUITE L2	\$ 12b  \$ 12c  \$ 12d  \$ Copy 2 for State, City, or Local Tax Departments a Employee's soc. sec. no 700-93-7688 18 Local wages. tips. etc. 	101666.71           3 Social security wages           101666.71           5 Medicare wages and tips           101666.71           7 Social security tips           9           11 Nongualified plans           14 Other           PA SUI EE           19 Local income tax           200.01           Copy 2 To Be Filed With Employee's ST/           1 Wages. tips. other compensation           101666.71           3 Social security wages           101666.71           5 Medicare wages and tips	13761.90 4 Social security tax withheld 6 303.34 6 Medicare tax withheld 1474.17 8 Allocated tips 10 Dependent care benefits 13 Statutory Control Control Cont
b Employer's Identification number c Employer's name, address, and ZIP code 47-5001357 CONTRIVE SOLUTIONS INC 367 WEST MAIN ST, SUITE L2 NORTHBOROUGH MA 01532 c Employee's first name and initial Last name 5965671 ARPANA JAISWAL 55 S VALLEY RD, UNIT H 03 PAOLI PA 19301 f Employee's address and ZIP code 15 State Employer's state I.D. No. 16 State wages, tips, etc. 17 State income tax PA 20041916 	\$ 12b  \$ 12c  \$ 12d  \$ Copy 2 for State, City, or Local Tax Departments a Employee's soc. sec. no 700-93-7688 18 Local wages. tips. etc. 81666.70 81666.70 81666.70 81666.70 81666.70 81666.70 81666.70 81666.70 81666.70 81666.70 81666.70 81666.70 	101666.71           3 Social security wages           101666.71           5 Medicare wages and tips           101666.71           7 Social security tips           9           11 Nongualified plans           14 Other           PA SUI EE           19 Local income tax           200.01           Copy 2 To Be Filed With Employee's ST/           1 Wages, tips, other compensation           101666.71           3 Social security wages           101666.71           5 Medicare wages and tips           101666.71	13761.90 4 Social security tax withheld 6 303.34 6 Medicare tax withheld 1474.17 8 Allocated tips 10 Dependent care benefits 13 Statutory Retirement Third-party plan Third-party 61.00 20 Locality name 21 21 3 Cocality name 21 21 3 Cocality name 21 21 3 Cocality name 21 3 Cocality name 3 Co
b Employer's Identification number c Employer's name, address, and ZIP code 367 WEST MAIN ST, SUITE L2 NORTHBOROUGH MA 01532 e Employee's first name and initial Last name 5965671 ARPANA JAISWAL 55 S VALLEY RD, UNIT H 03 PAOLI PA 19301 f Employee's address and ZIP code 15 State Employer's state LD. No. 16 State wages, tips, etc. 17 State income tax PA_ 20041916 101666.71 PA_ 20041916 3261.21. Form W-2 Wage and Tax Statement 2021 Department of the Treasury-Internal Revenue Service b Employer's name, address, and ZIP code 367 WEST MAIN ST, SUITE L2 NORTHBOROUGH MA 01532	\$ 12b  \$ 12c  \$ 12d  \$ Copy 2 for State, City, or Local Tax Departments a Employee's soc. sec. no 700-93-7688 18 Local wages, tips, etc. 81666.70 81666.70 81666.70 81666.70 81666.70 81666.70 81666.70 81666.70 81666.70 81666.70 81666.70 81666.70 	101666.71           3 Social security wages           101666.71           5 Medicare wages and tips           101666.71           7 Social security tips           9           11 Nongualified plans           14 Other           PA SUI EE           19 Local income tax           200.01           Copy 2 To Be Filed With Employee's ST/           1 Wages, tips, other compensation           101666.71           3 Social security wages           101666.71           5 Medicare wages and tips           101666.71	13761.90         4 Social security tax withheld         6303.34         6 Medicare tax withheld         1474.17         8 Allocated tips         10 Dependent care benefits         13 Statutory plan         1474.17         6 Medicare tips         10 Dependent care benefits         13 Statutory plan         14761.90         20 Locality name         21         21         21         21         21         21         21         21         21         3761.90         4 Social security tax withheld         13761.90         4 Social security tax withheld         6303.34         6 Medicare tax withheld         1474.17         8 Allocated tips
b Employer's Identification number c Employer's name, address, and ZIP code CONTRIVE SOLUTIONS INC 367 WEST MAIN ST, SUITE L2 NORTHBOROUGH MA 01532 e Employee's first name and initial Last name 5965671 ARPANA JAISWAL 55 S VALLEY RD, UNIT H 03 PAOLI PA 19301 f Employer's state ID. No. 16 State wages, tips, etc. 17 State income tax PA 20041916101666.71 PA 20041916101666.71 Form W-2 Wage and Tax Statement 2021 Department of the Treasury-Internal Revenue Service b Employer's Identification number c Employer's Identification number c Employer's Identification ST, SUITE L2 NORTRIVE SOLUTIONS INC 367 WEST MAIN ST, SUITE L2 NORTHBOROUGH MA 01532 is Employer's first name and initial Last name 5965671	\$         12b         12c         12d         12d         \$         12d         \$         12d         \$         Copy 2 for State, City, or Local Tax Departments         a Employee's soc. sec. no 700-93-7688         18 Local wages, tips, etc.         -       -         000-00.01.01         OMB # 1545-0008         12a See instructions for Box 12         \$         12b         \$         12c         \$         12c         \$         12d         \$	101666.71           3 Social security wages           101666.71           5 Medicare wages and tips           101666.71           7 Social security tips           9           11 Nongualified plans           14 Other           PA SUI EE           19 Local income tax           200.01           Copy 2 To Be Filed With Employee's ST/           1 Wages, tips, other compensation           101666.71           3 Social security wages           101666.71           5 Medicare wages and tips           101666.71	13761.90         4 Social security tax withheld         6 Medicare tax withheld         1474.17         8 Allocated tips         10 Dependent care benefits         13 Statutory         Plan         Colocality name         21         21         21         21         21         3 Statutory         Colocality name         21         3 Colocality name         21         3 Colocality name         4 Social security tax withheld         13 Statytory         8 Milocated tips         10 Dependent care benefits         13 Statytory         13 Statytory
b Employer's Identification number c Employer's name, address, and ZIP code 367 WEST MAIN ST, SUITE L2 NORTHBOROUGH MA 01532 a Employee's first name and initial Last name 5965671 ARPANA JAISWAL 55 S VALLEY RD, UNIT H 03 PAOLI PA 19301 f Employer's state ID. No. 16 State wages, tips, etc. 17 State income tax PA _ 20041916 101666.71 3261.21. Form W-2 Wage and Tax Statement 2021 Department of the Treasury-Internal Revenue Service b Employer's Identification number c Employer's Identification number 2021 Department of the Treasury-Internal Revenue Service b Employer's Identification ST, SUITE L2 NORTHBOROUGH MA 01532 a Employee's first name and initial Last name 5965671 ARPANA JAISWAL	\$         12b          \$         12c          \$         12d          \$         12d          \$         Copy 2 for State, City, or Local Tax Departments         a Employee's soc. sec. no 700-93-7688         18 Local wages. tips. etc. 81666.70         81666.70         20000.01         OMB # 1545-0008         12a See instructions for Box 12          \$         12b          \$         12c          \$         12d          \$         13b information is being furnished to the inspection on yo be imposed on you if this income is taxable and you fill to report it.	101666.71         3 Social security wages         101666.71         5 Medicare wages and tips         101666.71         7 Social security tips         9         11 Nongualified plans         14 Other         PA SUI EE         19 Local income tax         9 200.01         Copy 2 To Be Filed With Employee's ST/2         1 Wages. tips. other compensation         101666.71         3 Social security wages         101666.71         5 Medicare wages and tips         101666.71         7 Social security tips         9	13761.90 4 Social security tax withheld 6 303.34 6 Medicare tax withheld 1474.17 8 Allocated tips 10 Dependent care benefits 13 Statutory Control Control Cont
b Employer's Identification number c Employer's name, address, and ZIP code GONTRIVE SOLUTIONS INC 367 WEST MAIN ST, SUITE L2 NORTHBOROUGH MA 01532 e Employee's first name and initial Last name 5965671 ARPANA JAISWAL 55 S VALLEY RD, UNIT H 03 PAOLI PA 19301 f Employer's state ID. No. 16 State wages, tips, etc. 17 State income tax PA 20041916 101666.71 PA 20041916 101666.71 Form W-2 Wage and Tax Statement 2021 Department of the Treasury-Internal Revenue Service b Employer's Identification number c Employer's Identification number c Employer's Identification SINC 367 WEST MAIN ST, SUITE L2 NORTHBOROUGH MA 01532 e Employee's first name and initial Last name 5965671	\$         12b         12c         12c         12d         12d         \$         12d         18 Local wages. tips. etc.         -       -         -       2         0       0         -       -         2       0         0       -         -       -         2       0         0       -         -       -         2       0         0       -         -       -         0       -         0       -         12b       1\$         12c       \$         12d       \$         12d       \$         12d       \$         12d       \$         12d       \$         12d       \$	101666.71           3 Social security wages           101666.71           5 Medicare wages and tips           101666.71           7 Social security tips           9           11 Nongualified plans           14 Other           PA SUI EE           19 Local income tax           816.70           200.01           Copy 2 To Be Filed With Employee's ST/           1 Wages. tips. other compensation           101666.71           3 Social security wages           101666.71           5 Medicare wages and tips           101666.71           7 Social security tips           9           11 Nongualified plans	13761.90         4 Social security tax withheld         6 Medicare tax withheld         1474.17         8 Allocated tips         10 Dependent care benefits         13 Statutory         employee         Plant         Third-party         0         61.00         20 Locality name         21         21         21         21         21         21         31 Cocality name         21         31 Cocality name         31 Statutory         61.00         4 Social security tax withheld         13 Figure         61 A B Allocated tips         10 Dependent care benefits         13 Statutory         13 Statutory         14 T4 17
b Employer's Identification number       47-5001357         CONTRIVE SOLUTIONS INC         367 WEST MAIN ST,         SUITE L2         NORTHBOROUGH MA 01532         e Employer's Iname and Initial         Last name         5965671         ARPANA JAISWAL         55 S VALLEY RD, UNIT H 03         PAOLI PA 19301         f Employer's address and ZIP code         15 State       Employer's state ID. No. 16 State wages. tips.etc.         17 State income tax         PA       20041916	\$         12b          \$         12c          \$         12d          \$         12d          \$         Copy 2 for State, City, or Local Tax Departments         a Employee's soc. sec. no 700-93-7688         18 Local wages. tips. etc. 81666.70         81666.70         20000.01         OMB # 1545-0008         12a See instructions for Box 12          \$         12b          \$         12c          \$         12d          \$         13b information is being furnished to the inspection on yo be imposed on you if this income is taxable and you fill to report it.	101666.71         3 Social security wages         101666.71         5 Medicare wages and tips         101666.71         7 Social security tips         9         11 Nongualified plans         14 Other         PA SUI EE         19 Local income tax         9 200.01         Copy 2 To Be Filed With Employee's ST/2         1 Wages. tips. other compensation         101666.71         3 Social security wages         101666.71         5 Medicare wages and tips         101666.71         7 Social security tips         9	13761.90         4 Social security tax withheld         6 Medicare tax withheld         1474.17         8 Allocated tips         10 Dependent care benefits         13 Statutory         Plan         Colocality name         21         21         21         21         21         3 Statutory         Colocality name         21         3 Colocality name         21         3 Colocality name         4 Social security tax withheld         13 Statytory         8 Milocated tips         10 Dependent care benefits         13 Statytory         13 Statytory
b Employer's Identification number c Employer's name, address, and ZIP code 47-5001357 CONTRIVE SOLUTIONS INC 367 WEST MAIN ST, SUITE L2 NORTHBOROUGH MA 01532 ie Employee's first name and initial Last name 5965671 ARPANA JAISWAL 55 S VALLEY RD, UNIT H 03 PAOLI PA 19301 <u>f Employer's state ID. No. 16 State wages, tips, etc.</u> 17 State income tax PA _ 20041916 101666.71 3261.21. Form W-2 Wage and Tax Statement 2021 Department of the Treasury-Internal Revenue Service <u>b Employer's Identification number</u> c Employer's Identification number 2021 Department of the Treasury-Internal Revenue Service <u>b Employer's Identification number</u> c Employer's Identification ST, SUITE L2 NORTHBOROUGH MA 01532 ie Employee's first name and initial Last name 5965671 ARPANA JAISWAL	\$         12b         12c         12c         12c         12d         12d         \$         12d         12b         20000.01         0MB # 1545-0008         12e         \$         12b         \$         12c         \$         12c         \$         12c         \$         12d         \$	101666.71           3 Social security wages           101666.71           5 Medicare wages and tips           101666.71           7 Social security tips           9           11 Nongualified plans           14 Other           PA SUI EE           19 Local income tax           816.70           200.01           Copy 2 To Be Filed With Employee's ST/           1 Wages. tips. other compensation           101666.71           3 Social security wages           101666.71           5 Medicare wages and tips           101666.71           7 Social security tips           9           11 Nongualified plans	13761.90         4 Social security tax withheld         6 Medicare tax withheld         1474.17         8 Allocated tips         10 Dependent care benefits         13 Statutory         employee         Plant         Third-party         0         61.00         20 Locality name         21         21         21         21         21         21         31 Cocality name         21         31 Cocality name         31 Statutory         61.00         4 Social security tax withheld         13 Figure         61 A B Allocated tips         10 Dependent care benefits         13 Statutory         13 Statutory         14 T4 17
b Employer's Identification number or Employer's name, address, and ZIP code       47-5001357         CONTRIVE SOLUTIONS INC       367 WEST MAIN ST, SUITE L2         NORTHBOROUGH MA 01532       5965671         I Employer's Iname and Initial       5965671         ARPANA JAISWAL       55 S VALLEY RD, UNIT H 03         PAOLI PA 19301       1531         1 Employer's address and ZIP code       17 State income tax         1 State       Employer's state ID. No. 16 State wages, tips, etc.       17 State income tax         PA       20041916       3261.21         Form W-2 Wage and Tax Statement       2021 Department of the Treasury-Internal Revenue Service         b Employer's Identification number       47-5001357         CONTRIVE SOLUTIONS INC       367 WEST MAIN ST, SUITE L2       128         NORTHBOROUGH MA 01532       128         1 Employer's first name and initial       128         5965671       5 S VALLEY RD, UNIT H 03         PAOLI PA 19301       1         1 Employer's address and ZIP code       5965671	\$         12b         12c         12d         12d         12d         12d         12d         12d         15         12d         15         12d         15         12d         15         12cal Tax Departments         18 Local wages, tips, etc.         -       -         -       -         000-93-7688         18 Local wages, tips, etc.         -       -         000-0.01.01         OMB # 1545-0008         12a See instructions for Box 12         \$         12b         12         12c         \$         12c         \$         12c         \$         12c         \$         12d         \$         12d         \$         12d         \$         12d         \$         12d         \$         12d         \$         12d <td>101666.71         3 Social security wages         101666.71         5 Medicare wages and tips         101666.71         7 Social security tips         9         11 Nongualified plans         14 Other         PA SUI EE            19 Local income tax         101666.70         700.01         Copy 2 To Be Filed With Employee's ST/         1 Wages. tips. other compensation         101666.71         3 Social security wages         101666.71         5 Medicare wages and tips         101666.71         5 Medicare wages and tips         101666.71         7 Social security tips         9         11 Nongualified plans         14 Other         PA SUI EE</td> <td>13761.90         4 Social security tax withheld         6 Medicare tax withheld         1474.17         8 Allocated tips         10 Dependent care benefits         13 Statutory         relice plan         1474.17         8 Allocated tips         10 Dependent care benefits         13 Statutory         relice pay         1474.17         8 Allocated tips         13 Statutory         Retirement         Philo         61.00         20 Locality name         21         21         21         21         21         21         21         21         21         31 Statutory         13 Federal income tax withheld         13 761.90         4 Social security tax withheld         6303.34         6 Medicare tax withheld         1474.17         8 Allocated tips         10 Dependent care benefits         13 Statutory         plan         13 Statutory         1474.17         8 Allocated tips         10 Dep</td>	101666.71         3 Social security wages         101666.71         5 Medicare wages and tips         101666.71         7 Social security tips         9         11 Nongualified plans         14 Other         PA SUI EE            19 Local income tax         101666.70         700.01         Copy 2 To Be Filed With Employee's ST/         1 Wages. tips. other compensation         101666.71         3 Social security wages         101666.71         5 Medicare wages and tips         101666.71         5 Medicare wages and tips         101666.71         7 Social security tips         9         11 Nongualified plans         14 Other         PA SUI EE	13761.90         4 Social security tax withheld         6 Medicare tax withheld         1474.17         8 Allocated tips         10 Dependent care benefits         13 Statutory         relice plan         1474.17         8 Allocated tips         10 Dependent care benefits         13 Statutory         relice pay         1474.17         8 Allocated tips         13 Statutory         Retirement         Philo         61.00         20 Locality name         21         21         21         21         21         21         21         21         21         31 Statutory         13 Federal income tax withheld         13 761.90         4 Social security tax withheld         6303.34         6 Medicare tax withheld         1474.17         8 Allocated tips         10 Dependent care benefits         13 Statutory         plan         13 Statutory         1474.17         8 Allocated tips         10 Dep
b Employer's Identification number or Employer's name, address, and ZIP code       47-5001357         CONTRIVE SOLUTIONS INC       367 WEST MAIN ST, SUITE L2         NORTHBOROUGH MA 01532       Image: Complexity of the second se	\$         12b          \$         12c          \$         12d          \$         12d          \$         Copy 2 for State, City, or Local Tax Departments         a Employee's soc. sec. no 700-93-7688         18 Local wages, tips, etc.         -       81666.70         -       -         0 MB # 1545-0008         12a See instructions for Box 12          \$         12b          \$         12c          \$         12d          \$         12d          \$         12d          \$         12d          \$         12d          \$         12d          \$         12c          \$         12d          \$         12d          \$         12d          \$         12d          \$         12d          \$         15 income is taxable and you required to the intermal Revenue Service. If you are required to the is tax retur, a nedigence on you if this income	101666.71         3 Social security wages         101666.71         5 Medicare wages and tips         101666.71         7 Social security tips         9         11 Nongualified plans         14 Other         PA SUI EE         19 Local income tax         101666.71         7 Gocial security tips         19 Local income tax         10 Local income tax	13761.90         4 Social security tax withheld         6 Medicare tax withheld         1474.17         8 Allocated tips         10 Dependent care benefits         13 Statutory         Plan         20 Locality name         21.         3761.90         4 Social security tax withheld         13 Statutory         Plan         Third-party         Plan         Statutory         Caltocality name         61.00 </td

Form W-2 Wage and Tax Statemen	2021	Department of the Treasu	iry-Internal Revenue Service

----Copy C For Employee's Records