

OMB No. 1545-0008
Form W-2 Wage and Tax Statement 2021

c Employer's name, address, and ZIP code
 THE GENERAL HOSPITAL CORP
 CENTRAL PAYROLL
 399 REVOLUTION DRIVE STE 715
 SOMERVILLE MA 02145

e Employee's name, address, and ZIP code
 SRINATH IYER
 1 DELL ST
 APT 2
 SOMERVILLE MA 02145

7 Social security tips	1 Wages, tips, other compensation 20437.92	2 Federal income tax withheld 1609.27
8 Allocated tips	3 Social security wages	4 Social security tax withheld
9	5 Medicare wages and tips	6 Medicare tax withheld
10 Dependent care benefits	11 Nonqualified plans	12a
b Employer identification number (EIN) 04-2697983	14 Other MAPFML 26.64	12b
a Employee's social security number 050-49-1453		12c
13 Statutory employee Retirement plan Third-party sick pay		12d
15 State MA	16 State wages, tips, etc. 20437.92	17 State income tax 1021.93
18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Copy 2 - To Be Filed With Employee's State, City, or Local Income Tax Return Dept. of the Treasury - IRS

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Copy C - For EMPLOYEE'S RECORDS (See Notice to Employee on the back of Copy B.) Dept. of the Treasury - IRS

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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