

| Copy B To Be Filed With Employee's FEDERAL Tax Return. | | OMB No. 1545-0008 | |
|---|--|--|--|
| a Employee's soc sec no 782-72-6817 | 1 Wages, tips, other comp. 46707.60 | 2 Federal income tax withheld 6043.91 | |
| | 3 Social security wages 12756.30 | 4 Social security tax withheld 790.89 | |
| b Employer ID number 85-1465569 | 5 Medicare wages and tips 12756.30 | 6 Medicare tax withheld 184.98 | |
| | c Employer's name, address, and ZIP code Origin Hubs Inc 10315 Chapel Hill Rd Morrisville, NC 27560 | | |
| d Control number 002020216817 | | | |
| e Employee's name, address, and ZIP code Anil Kumar Yadavalli 4407 Hopson road Apt # 4209 Morrisville, NC 27560 | | | |
| 7 Social security tips | 8 Allocated tips | 9 | |
| 10 Dependent care benefits | 11 Nonqualified plans | 12a Code See inst. for box 12 | |
| 13 Statutory employee | 14 Other | 12b Code | |
| | | 12c Code | |
| | | 12d Code | |
| Retirement plan | | | |
| Third-party sick pay | | | |
| NC 601298393 | 46707.60 | 1999.00 | |
| 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 | |

Form W-2 Wage and Tax **2021** Dept. of the Treasury -- IRS
This information is being furnished to the Internal Revenue Service.

| Copy 2 To Be Filed With Employee's State, City or Local Income Tax Return. | | OMB No. 1545-0008 | |
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Form W-2 Wage and Tax **2021** Dept. of the Treasury -- IRS

| Copy C For EMPLOYEE'S RECORDS. (See Notice to Employee on back of Copy B.) | | OMB No. 1545-0008 | |
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Form W-2 Wage and Tax **2021** Dept. of the Treasury -- IRS
This information is being furnished to the IRS. 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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