OMB No. 1545-0008 Form	W-2	Wage and Tax	Sta	tement	2021
 Employee's social security number 	1 Wages		2 Fe	ederal income t	
		8331.53		694	1.02
	3 Social	security wages	4 So	ocial security ta	x withheld
b Employer ID number (EIN)	5 Modic	8331.53 are wages and tips	6 M	edicare tax with	bold
45-3725224	J Weulca	8331.53	0 101	eulcare lax will	ineid
c Employer's name, address, a	and ZIP c	ode			
Framework MI, Framework MI, 9435 Watersto Cincinnati OH	Inc. ne Blv				
d Control number 00	0084				
e Employee's name, address,	and ZIP	code			
Plano TX 75024 7 Social security tips	8 All	ocated tips	9		
10 Dependent care benefits	11 Nongualified plans		12	12a See instructions for box	
To Dependent care benents			Cod		0113 101 00x 12
12b	12c		12 8	d	
13 Statutory	Re	tirement		Third-party sick pay	
14 Other					
OH 453725224		8331.53		209.53	
15 State/Employer's state ID number		16 State wages, tips, etc.		17 State income tax	
18 Local wages, tips, etc. 8331.53		19 Local income tax 104.14		20 Locality r Blue As	
Copy B - To Be Filed With Emp This information is being furnish DXA				Dept. of the	e Treasury - IRS

This information is being furnished to the IRS. If you are required to file a tax return, a negligence penalty/other sanction may be imposed on you if this income is taxable and you fail to report it.

DMB No. 1545-0008 Form	•	•		•	2021		
a Employee's social security				Federal income ta			
number	8331.53			694.02			
096-69-5479				4 Social security tax withheld			
b Employer ID number (EIN)	8331.53				. manoid		
	5 Medi	care wages and tips	6	Medicare tax with	held		
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c Employer's name, address,	and ZIP	code	I				
Framework MI, Framework MI, 9435 Watersto Cincinnati OH	Inc. ne Bl						
d Control number 00	0084						
e Employee's name, address,	and ZIF	code					
Plano TX 75024 7 Social security tips	8 A	llocated tips		9			
10 Dependent care benefits	11	Nongualified plans		12a See instructio	no for boy 12		
TO Dependent care benefits	1.1	Nonquaimed plans					
12b	12c	:		e 12d			
13 Statutory employee	R	etirement		Third-party sick pay			
14 Other							
OH 453725224		833	1.53	20	9.53		
15 State/Employer's state ID n	16 State wages,	tips, etc.	tc. 17 State income tax				
18 Local wages, tips, etc. 8331.53	19 Local income tax 104.14			20 Locality name Blue As			
Copy C - For EMPLOYEE'S RE	CORDS	Gee Notice on ba	ck.)	Dept. of the	Treasury - IRS		

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

a Employee's social security number	y 1 Wages, tips, other comp. 2 Fe 8331.53		ederal income tax withheld 694.02				
096-69-5479	3 Socia	l security wages	4 5	ocial security ta			
b Employer ID number (EIN)	0 00010	8331.53		oolal occurity to			
45 0705004	5 Media	care wages and tips	6 M	edicare tax wit	hheld		
45-3725224		8331.53					
c Employer's name, address	and ZIP	code					
Framework MI, Inc. Framework MI, Inc. 9435 Waterstone Blvd. Ste 140 Cincinnati OH 45249							
d Control number 000084							
e Employee's name, address, and ZIP code							
Siri Chandana Jetti 5720 ozeman Dr Apt 2-11310 Plano TX 75024							
7 Social security tips 8 A		located tips 9					
					ions for box 12		
 ຊູ	12c		12 12				
13 Statutory employee	R	etirement plan		Third-party sick pay			
14 Other							
OH 453725224		8331.5	3	209.53			
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			
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or Local Income Tax Return

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

OMD NO. 1343-0000		mage and rax	0				
a Employee's social security	/ · · · · · · · · · · · · · · · · · · ·		ederal income tax withheld				
		8331.53		694.02			
096-69-5479	3 Socia	al security wages	4 S	ocial security tax withheld			
b Employer ID number (EIN)		8331.53					
45-3725224	5 Medi	care wages and tips 8331.53	6 Medicare tax withheld				
c Employer's name, address	and ZIP	code					
Framework MI, Inc. Framework MI, Inc. 9435 Waterstone Blvd. Ste 140 Cincinnati OH 45249							
d Control number 00	d Control number 000084						
Siri Chandana Jetti 5720 ozeman Dr Apt 2-11310 Plano TX 75024							
7 Social security tips	7 Social security tips 8 Allocated tips		9				
10 Dependent care benefits	11 Nonqualified plans		12a See instructions for box 12				
12b	12c		12d				
13 Statutory employee	Retirement plan		Third-party Sick pay				
14 Other							
OH 453725224		8331.53	8331.53 209.53				
15 State/Employer's state ID number		16 State wages, tips, et	c.	17 State income tax			
18 Local wages, tips, etc.		19 Local income tax		20 Locality name			
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