



**W-2** Wage and Tax Statement **2021**  
 Copy C for employee's records. OMB No. 1545-0008

**d** Control number 000120 RD/IFS Dept. Corp. Employer use only **1**

**c** Employer's name, address, and ZIP code  
**KEYSERIES LLC**  
**110 WASHINGTON AVENUE**  
**N HAVEN, CT 06473**

Batch #91174

**e/f** Employee's name, address, and ZIP code  
**ANUDEEP BATHULA**  
**38000 CAMDEN ST**  
**41**  
**FREMONT, CA 94536**

**b** Employer's FED ID number 27-0239099 **a** Employee's SSA number XXX-XX-6186

**1** Wages, tips, other comp. 25000.00 **2** Federal income tax withheld 2003.31

**3** Social security wages **4** Social security tax withheld

**5** Medicare wages and tips **6** Medicare tax withheld

**7** Social security tips **8** Allocated tips

**9** **10** Dependent care benefits

**11** Nonqualified plans **12a** See instructions for box 12

**14** Other 125.00 CTPL  
**12b** |  
**12c** |  
**12d** |  
**13** Stat emp. Ret. plan 3rd party sick pay

**15** State CT **16** State wages, tips, etc. 59508200-000 25000.00

**17** State income tax 1747.50 **18** Local wages, tips, etc.

**19** Local income tax **20** Locality name

This blue section is your Earnings Summary which provides more detailed information on the generation of your W-2 statement. The reverse side includes instructions and other general information.

1. Your Gross Pay was adjusted as follows to produce your W-2 Statement.

	Wages, Tips, other Compensation Box 1 of W-2	Social Security Wages Box 3 of W-2	Medicare Wages Box 5 of W-2	CT. State Wages, Tips, Etc. Box 16 of W-2
Gross Pay	25,000.00	25,000.00	25,000.00	25,000.00
Reported W-2 Wages	25,000.00	0.00	0.00	25,000.00

2. Employee Name and Address.

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Federal Filing Copy  
**W-2** Wage and Tax Statement **2021**  
 Copy B to be filed with employee's Federal Income Tax Return. OMB No. 1545-0008

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CT.State Reference Copy  
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 Copy 2 to be filed with employee's State Income Tax Return. OMB No. 1545-0008

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