

Copy B--To Be Filed With Employee's FEDERAL Tax Return			OMB No. 1545-0008		
This information is being furnished to the Internal Revenue Service.					
a. Employee's social security number	1. Wages, tips, other compensation	2. Federal income tax withheld			
681945659	69916.64	11120.79			
b. Employer ID number (EIN)	3. Social security wages	4. Social security tax withheld			
	69916.64	4334.83			
82-3307131	5. Medicare wages and tips	6. Medicare tax withheld			
	69916.64	1013.79			
c. Employer's name, address, and ZIP code					
CodeIgnitors Inc 3616 Kirkwood Hwy WILMINGTON, DE 19808					
d. Control number					
e. Employee's name, address, and ZIP code					
Shruthi Chada 5024 STABLE RIDGE PL. GLEN ALLEN, VA 23059					
7. Social security tips	8. Allocated tips	9. Verification Code			
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					
VA	30-823307131F-001	69916.64	3589.99		
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 Statement **2021** Department of the Treasury - 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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a. Employee's social security number	1. Wages, tips, other compensation	2. Federal income tax withheld			
681945659	69916.64	11120.79			
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		12d. Code			
Retirement plan					
Third-party sick pay					
VA	30-823307131F-001	69916.64	3589.99		
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 Statement **2021** Department of the Treasury - Internal Revenue Service

Copy C--For EMPLOYEE'S RECORDS(See Notice to Employee.)			OMB No. 1545-0008		
This information is being furnished to the Internal Revenue Service. 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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681945659	69916.64	11120.79			
b. Employer ID number (EIN)	3. Social security wages	4. Social security tax withheld			
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82-3307131	5. Medicare wages and tips	6. Medicare tax withheld			
	69916.64	1013.79			
c. Employer's name, address, and ZIP code					
CodeIgnitors Inc 3616 Kirkwood Hwy WILMINGTON, DE 19808					
d. Control number					
e. Employee's name, address, and ZIP code					
Shruthi Chada 5024 STABLE RIDGE PL. GLEN ALLEN, VA 23059					
7. Social security tips	8. Allocated tips	9. Verification Code			
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					
VA	30-823307131F-001	69916.64	3589.99		
15. State	Employer's state ID number	16. State wages, tips,	17. State income tax		
18. Local wages, tips, etc.	19. Local income tax	20. Locality name			

Form W-2 Wage and Tax Statement **2021** Department of the Treasury - Internal Revenue Service

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