

| Copy B - For Employee's Federal Income Tax Return | | 2021 | | OMB No. 1545-0008 |
|--|--|---|--|-------------------------|
| a Employee's social security number 047-73-7337 | 1 Wages, tips, other comp. 67603.69 | 2 Federal income tax withheld 10614.18 | | |
| b Employer ID number 27-2220139 | 3 Social security wages 69520.37 | 4 Social security tax withheld 4310.26 | | |
| | 5 Medicare wages and tips 69520.37 | 6 Medicare tax withheld 1008.02 | | |
| c Employer's name, address, and ZIP code Progyny, Inc. 1359 Broadway Fl 2 New York, NY 10018 | | | | |
| d Control number 41576 565 | | | | |
| e Employee's name, address, and ZIP code Latha Vemula 1614 Mosaic Way Smyrna, GA 30080 | | | | |
| 7 Social security tips | | 8 Allocated tips | | 9 Advance EIC payment |
| 10 Dependent care benefits | | 11 Nonqualified plans | | |
| 12a C | 86.10 | 13 Statutory employee Retirement plan 3rd-party sick pay X | | |
| 12b D | 1916.68 | 14 Other CELL 562.50 | | |
| 12c DD | 5171.74 | | | |
| 12d W | 587.44 | | | |
| N/A | | N/A | | N/A |
| 15 State Employer's State ID# | | 16 State wages, tips, etc. | | 17 State income tax |
| 18 Local wages, tips, etc. N/A | | 19 Local income tax N/A | | 20 Locality name N/A |

Form W-2 Wage and Tax Statement
This information is being furnished to the Internal Revenue Service

Dept. of the Treasury - IRS

| Copy 2 - For Employee's State Income Tax Return | | [GA] | 2021 | | OMB No. 1545-0008 |
|--|--|---|---------|-------------------------|----------------------|
| a Employee's social security number 047-73-7337 | 1 Wages, tips, other comp. 67603.69 | 2 Federal income tax withheld 10614.18 | | | |
| b Employer ID number 27-2220139 | 3 Social security wages 69520.37 | 4 Social security tax withheld 4310.26 | | | |
| | 5 Medicare wages and tips 69520.37 | 6 Medicare tax withheld 1008.02 | | | |
| c Employer's name, address, and ZIP code Progyny, Inc. 1359 Broadway Fl 2 New York, NY 10018 | | | | | |
| d Control number 41576 565 | | | | | |
| e Employee's name, address, and ZIP code Latha Vemula 1614 Mosaic Way Smyrna, GA 30080 | | | | | |
| 7 Social security tips | | 8 Allocated tips | | 9 Advance EIC payment | |
| 10 Dependent care benefits | | 11 Nonqualified plans | | | |
| 12a C | 86.10 | 13 Statutory employee Retirement plan 3rd-party sick pay X | | | |
| 12b D | 1916.68 | 14 Other CELL 562.50 | | | |
| 12c DD | 5171.74 | | | | |
| 12d W | 587.44 | | | | |
| GA | 3492121HN | 67603.69 | 3512.10 | | |
| 15 State Employer's State ID# | | 16 State wages, tips, etc. | | 17 State income tax | |
| 18 Local wages, tips, etc. N/A | | 19 Local income tax N/A | | 20 Locality name N/A | |

Form W-2 Wage and Tax Statement

Dept. of the Treasury - IRS

Copy C - FOR EMPLOYEE'S RECORDS ONLY**2021**OMB No.
1545-0008

| | | |
|--|--|---|
| a Employee's social security number 047-73-7337 | 1 Wages, tips, other comp. 67603.69 | 2 Federal income tax withheld 10614.18 |
| b Employer ID number 27-2220139 | 3 Social security wages 69520.37 | 4 Social security tax withheld 4310.26 |
| | 5 Medicare wages and tips 69520.37 | 6 Medicare tax withheld 1008.02 |
| c Employer's name, address, and ZIP code Progyny, Inc. 1359 Broadway Fl 2 New York, NY 10018 | | |
| d Control number 41576 565 | | |
| e Employee's name, address, and ZIP code Latha Vemula 1614 Mosaic Way Smyrna, GA 30080 | | |
| 7 Social security tips | 8 Allocated tips | 9 Advance EIC payment |
| 10 Dependent care benefits | 11 Nonqualified plans | |
| 12a C | 86.10 | 13 Statutory employee Retirement plan 3rd-party sick pay X |
| 12b D | 1916.68 | 14 Other CELL 562.50 |
| 12c DD | 5171.74 | |
| 12d W | 587.44 | |
| GA 3492121HN | 67603.69 | 3512.10 |
| 15 State Employer's State ID# | 16 State wages, tips, etc. | 17 State income tax |
| 18 Local wages, tips, etc. N/A | 19 Local income tax N/A | 20 Locality name N/A |

Form W-2 Wage and Tax Statement

Dept. of the Treasury - IRS