Copy B To Be FEDERAL Tax	Filed w Return	ith Emp	oloyee's	20 :	21 B No. 1545-0008				
a Employee's SSN		1 Wages, tips, other comp.			2 Federal income tax withheld				
709-61-073		81852.14			11945.00				
	3 Soc	3 Social security wages 81852.14			4 Social security tax withheld 5074.83				
b Employer ID no. (EIN)		5 Medicare wages and tips			6 Medicare tax withheld				
45-283447		81852.14			1186.86				
c Employer's name, VERNUS T	address, a ECHNC	and ZIP cod LOGIE	de ES INC						
2650 HOR	IZON	DR SE	E, SUITE	221					
GRAND RAPIDS MI 49546									
d Control number									
e Employee's name, address, and ZIP code Suff.									
TRINATH PENTAKOTA									
3312 S CREEK DR SE APT 102 KENTWOOD MI 49512									
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KENTWOOD 7 Social security tips 0 Dependent care be	nefits	8 Allocate	ed tips	9 12a C	ode See inst. for box 12				
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KENTWOOD 7 Social security tips 10 Dependent care be 13 Statutory employee	nefits	8 Allocate	ed tips	9 12a C	ode See inst. for box 12 DD 2321.46 ode				
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TS State Employer' 18 Local wages, tips,	14 0 14 4 4 7 5 state ID 1 etc.	8 Allocate 11 Nonqua ther	ed tips alified plans 8185	MI 9 12a C 12b C 12c C 12d C 52 . 14 ps, etc. 20 Loca 0 MI	ode See inst. for box 12 DD 2321.46 ode ode ode 3270.95 17 State income tax				

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. **2021** OMB No. 1545-0008 1 Wages, tips, other comp. 2 Federal income tax withheld a Employee's SSN 81852.14 11945.00 709-61-0730 **3** Social security wages 4 Social security tax withheld 5074.83 81852.14 **b** Employer ID no. (EIN) 5 Medicare wages and tips 6 Medicare tax withheld 45-2834475 81852.14 1186.86 c Employer's name, address, and ZIP code VERNUS TECHNOLOGIES INC 2650 HORIZON DR SE, SUITE 221 GRAND RAPIDS ΜI 49546 d Control number e Employee's name, address, and ZIP code Suff. TRINATH PENTAKOTA 3312 S CREEK DR SE APT 102 KENTWOOD MΙ 49512 8 Allocated tips 7 Social security tips 10 Dependent care benefits 11 Nonqualified plans 12a Code See inst. for box 12 2321.46 DD 14 Other 12b Code Statutory employee 12c Code Retirement Plan 12d Code Third-party sick pay 45-2834475 81852.14 MΙ 3270.95 16 State wages, tips, etc. 15 State Employer's state ID number 17 State income tax 19 Local income tax 18 Local wages, tips, etc. 20 Locality name 0.00 MI - C 81852.14 0.00 MI - C

Form W-2 Wage and Tax Statement

Dept. of the Treasury - IRS

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 fall to report it.

Copy C For EMPLOYEE'S RECORDS. 2021 (See Notice to Employees). OMB No. 1545-0008									
a Employee's SSN				2 Fe	2 Federal income tax withheld				
a Employee a cort		81852.14			11945.00				
709-61-0730	3 Soci	3 Social security wages				4 Social security tax withheld			
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45-2834475			81852.14		1186.86				
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2650 HORIZON DR SE, SUITE 221									
GRAND RAPIDS MI 49546						49546			
d Control number									
e Employee's name, address, and ZIP code Suff. TRINATH PENTAKOTA 3312 S CREEK DR SE APT 102									
KENTWOOD MI 49512									
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Retirement Plan									
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b Employer ID no. (EIN)	5 Medi	care wage		6 Medicare tax withheld				
45-2834475		-	81852.14	1186.86				
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GRAND RAPIDS MI 49546								
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Form W-2 Wage and Tax Statement Dept. of the Treasury - IRS								