Copy B To Be Filed W		2022 OMB No. 1545-0008	Copy 2 To Be Filed W City, or Local Income		2022 OMB No. 1545-0008
a. Employee's SSN	1 Wages, tips, other comp.	2 Federal income tax withheld 1500.00	a. Employee's SSN	1 Wages, tips, other comp.	2 Federal income tax withheld
XXX-XX-7250	3 Social security wages	4 Social security tax withheld	XXX-XX-7250	3 Social security wages	4 Social security tax withheld
b. Employer ID number	5 Medicare wages and tips	6 Medicare tax withheld	b. Employer ID number	5 Medicare wages and tips	6 Medicare tax withheld
87-1666674			87-1666674		
c. Employer's name, addre			c. Employer's name, address		
Laniakea Companies 12636 Sweet Bay Dr			Laniakea Companies 12636 Sweet Bay Dr		
Euless, TX 76040			Euless, TX 76040		
d. Control number			d. Control number		
e. Employee's name, address, and ZIP code			e. Employee's name, address, and ZIP code		
Swapna Banoth			Swapna Banoth		
229 Prairie Falcon Way Leander, TX 78641			229 Prairie Falcon Way Leander, TX 78641		
•			·		
7 Social security tips	8 Allocated tips		7 Social security tips	8 Allocated tips	
10 Dependent care benefits	11 Nonqualified plans	12a Code See inst. for box 12	10 Dependent care benefits	11 Nonqualified plans	12a Code See inst. for box 12
13 Statutory employee 1.	4 Other	12b Code	13 Statutory employee	14 Other	12b Code
Retirement plan		12c Code	Retirement plan		12c Code
Third party sick pay		12d Code	Third party sick pay		12d Code
		1.50			
15 State Emplr.'s state II 18 Local wages, tips,etc.	D # 16 State wages, tips, etc.	20 Locality name	15 State Emplr.'s state ID 18 Local wages, tips, etc.	0# 16 State wages, tips, etc.	20 Locality name
Form W-2 Wage and Tax S This information is being	Statement furnished to the Internal Revenue S	Dept. of the Treasury IRS service. 39-1908647	Form W-2 Wage and Tax S	State ment	Dept. of the Treasury IRS 39-190864
This information is being	furnished to the IRS. If you are requi	red to file a tax return, a negligence	AWW2-B22C	Copyright AccountantsWorld, 2004	
Copy C For EMPLOYE		2022 OMB No.	Copy 2 To Be Filed Wi	ith Employee's State,	2022 OMB No.
(See Notice to Emplo a. Employee's SSN	1 Wages, tips, other comp.	2 Federal income tax withheld	a. Employee's SSN	1 Wages, tips, other comp.	2 Federal income tax withheld
XXX-XX-7250	10000.00 3 Social security wages	1500.00 4 Social security tax withheld	XXX-XX-7250	10000.00 3 Social security wages	1500.00 4 Social security tax withheld
b. Employer ID number		6 Medicare tax with held	b. Employer ID number		·
87-1666674	5 Medicare wages and tips	o wedicare tax withherd	87-1666674	5 Medicare wages and tips	6 Medicare tax with held
c. Employer's name, addre			c. Employer's name, address, and ZIP code		
Laniakea Companies 12636 Sweet Bay Dr			Laniakea Companies 12636 Sweet Bay Dr		
Euless, TX 76040			Euless, TX 76040		
d. Control number			d. Control number		
e. Employee's name, address, and ZIP code			e. Employee's name, address, and ZIP code		
Swapna Banoth			Swapna Banoth		
229 Prairie Falcon Way			229 Prairie Falcon Way		
Leander, TX	78641		Leander, TX 7	8641	
7 Social security tips	8 Allocated tips		7 Social security tips	8 Allocated tips	
10 Dependent care benefit	ts 11 Nonqualified plans	12a Code See inst. for box 12	10 Dependent care benefits	11 Nonqualified plans	12a Code See inst. for box 12
13 Statutory employee 14	4 Other	12b Code	13 Statutory employee 1	14 Other	12b Code
Retirement plan		12c Code	Retirement plan		12c Code
·					
Third party sick pay		12d Code	Third party sick pay		12d Code
15 State Emplr.'s state I			15 State Emplr.'s state ID		
18 Local wages, tips, etc.	19 Local income tax	20 Locality name	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
For m W-2 Wage and Tax	Statement 39-1908647	Dept. of the Treasury IRS	Form W-2 Wage and Tax	State ment 39-1908647	Dept. of the Treasury IRS