

<b>a</b> Employee's SSN 704-67-9318		<b>b</b> Employer identification number (EIN) 45-4268147			OMB No. 1545-0008	
<b>c</b> Employer's name, address, and ZIP code NEW YORK CERTIFIED INTERIOR CORP. NEW YORK MAJOR CONSTRUCTION 17 MURRAY DRIVE  AIRMONT NY 10952		<b>1</b> Wgs, tips, other compn 92496.04	<b>2</b> Fed inc tax withheld 8786.00	<b>3</b> Social security wages 92496.04		
		<b>4</b> SS tax withheld 5734.75	<b>5</b> Medicare wages & tips 92496.04	<b>6</b> Medicare tax withheld 1341.19		
		<b>7</b> Social security tips	<b>8</b> Allocated tips	<b>9</b>		
<b>d</b> Control number		<b>10</b> Depdnt care benefits	<b>11</b> Nonqualified plans	<b>12a</b>		
<b>e</b> Employee's name, address, and ZIP code TANESH PRAVIN MUTHA 615 PAVONIA AVE APT 2205 JERSEY CITY NJ 07306		<b>13</b> Statutory employee <input type="checkbox"/>  Retirement plan <input type="checkbox"/>  Third-party sick pay <input type="checkbox"/>	<b>14</b> Other NY-SDI 31.20 NY-FLI 111.72	<b>12b</b>		
				<b>12c</b>		
				<b>12d</b>		
<b>15</b> State NY	<b>Employer's state ID number</b> 454268147	<b>16</b> State wages, tips, etc 92496.04	<b>17</b> State income tax 4659.81	<b>18</b> Local wages, tips, etc 21859.46	<b>19</b> Local income tax 798.35	<b>20</b> Locality name NY - Ci

Form **W-2**  
**Wage and Tax Statement**  
**2022**

Copy B To Be Filed with Employee's FEDERAL Tax Return  
This information is being furnished to the Internal Revenue Service.

REV 12/09/22 QBDT

Department of the Treasury — IRS

<b>a</b> Employee's SSN 704-67-9318		<b>b</b> Employer identification number (EIN) 45-4268147			OMB No. 1545-0008	
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<b>e</b> Employee's name, address, and ZIP code TANESH PRAVIN MUTHA 615 PAVONIA AVE APT 2205 JERSEY CITY NJ 07306		<b>13</b> Statutory employee <input type="checkbox"/>  Retirement plan <input type="checkbox"/>  Third-party sick pay <input type="checkbox"/>	<b>14</b> Other NY-SDI 31.20 NY-FLI 111.72	<b>12b</b>		
				<b>12c</b>		
				<b>12d</b>		
<b>15</b> State NY	<b>Employer's state ID No.</b> 454268147	<b>16</b> State wages, tips, etc 92496.04	<b>17</b> State income tax 4659.81	<b>18</b> Local wages, tips, etc 21859.46	<b>19</b> Local income tax 798.35	<b>20</b> Locality name NY - Ci

Form **W-2**  
**Wage and Tax Statement**  
**2022**

Copy 2 To Be Filed With Employee's State, City, or Local Income Tax Return.

REV 12/09/22 QBDT

<b>a</b> Employee's SSN 704-67-9318		<b>b</b> Employer identification number (EIN) 45-4268147			OMB No. 1545-0008	
<b>c</b> Employer's name, address, and ZIP code NEW YORK CERTIFIED INTERIOR CORP. NEW YORK MAJOR CONSTRUCTION 17 MURRAY DRIVE  AIRMONT NY 10952		This information is being furnished to the IRS. 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.				
		<b>1</b> Wgs, tips, other compn 92496.04	<b>2</b> Fed inc tax withheld 8786.00	<b>3</b> Social security wages 92496.04		
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Form **W-2**  
**Wage and Tax Statement**  
**2022**

Copy C For EMPLOYEE'S RECORDS.  
(See Notice to Employee.)

REV 12/09/22 QBDT