

CRP/H1510/345927

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

c Employer's name, address, and ZIP code
DOMINO'S PIZZA LLC
30 FRANK LLOYD WRIGHT DR.
P.O. BOX 997
ANN ARBOR MI 48106-0997

e Employee's name, address, and ZIP code
KALYAN RAMINENI
1825 SOUTH CRAWFORD STREET
APT E4
MOUNT PLEASANT MI 48858

7 Social security tips	1 Wages, tips, other comp	2 Federal income tax withheld
8 Allocated tips	3 Social security wages	4 Social security tax withheld
9	5 Medicare wages and tips	6 Medicare tax withheld
10 Dependent care benefits	11 Nonqualified plans	12a See instructions for box 12
13 <input type="checkbox"/> Statutory employee <input checked="" type="checkbox"/> Retirement plan <input type="checkbox"/> Third-party sick pay	14 Other	12b C 23.63
b Employer identification number (EIN) 38-3495003		12c W 800.00
a Employee's social security no. 168-93-2811		12d DD 2764.16

15 State MI ME-0244414	Employer's state ID no.	16 State wages, tips, etc. 62984.23	17 State income tax 2676.77	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
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Copy B To Be Filed With Employee's FEDERAL Tax Return This information is being furnished to the Internal Revenue Service. OMB No. 1545-0008 Dept. of the Treasury - IRS Visit the IRS Web Site at www.irs.gov/efile

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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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Copy C For EMPLOYEE'S RECORDS (See Notice to Employee on back of Copy B.) OMB No. 1545-0008 Dept. of the Treasury - IRS

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