b Employer's Identification number 83-1115842	12a See instructions for Box 12	1 Wages, tips, other compensation	2 Federal income tax withheld
c Employer's name, address, and ZIP code	\$	25000.00	3707.00
SAAS IT SERVICES	12b	3 Social security wages	4 Social security tax withheld
	12c	25000.00 5 Medicare wages and tips	1550.00 6 Medicare tax withheld
555 METRO PL N	\$	25000.00	362.50
	12d	7 Social security tips	8 Allocated tips
DUBLIN OH 43017			40 Danamalant anns han eite
Employee's first name and initial Last name  14687599	This information is being furnished to the	9	10 Dependent care benefits
	Internal Revenue Service	11 Nonqualified plans	13 Statutory Retirement Third-party employee plan sick pay
GOPALAKRISHNAN RADHAKRISHNAN	Copy B To Be Filed with		employe'e plan sick pay
646 ARABIAN CIRCLE	Employee's FEDERAL	14 Other	
	Tax Return		
MARYSVILLE OH 43040	a Employee's soc. sec. no		
f Employee's address and ZIP code	204-27-4884	1	
15 State   Employer's state I.D. No.   16 State wages, tips, etc.   17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
OH 54-148978 25000.00 784.10	25000.00	<u>375.</u> 00_	MARYSV
Form W-2 Wage and Tax Statement 2022 Department of the Treasury-Internal Revenue Service	OMB # 1545-0008	Copy B To Be Filed V	I Nith Employee's FEDERAL Tax Return
2022			
b Employer's Identification number c Employer's name, address, and ZIP code 83-1115842	12a See instructions for Box 12	1 Wages, tips, other compensation	2 Federal income tax withheld 3707.00
CAAC IM CEDUICEC	\$  12b	25000.00 3 Social security wages	4 Social security tax withheld
SAAS IT SERVICES	l Is	25000.00	1550.00
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DUBLIN OH 43017		7 Social Security tips	8 Allocated tips
e Employee's first name and initial Last name	<b> </b>	9	10 Dependent care benefits
14687599			
GOPALAKRISHNAN RADHAKRISHNAN	Copy 2 for State, City, or	11 Nonqualified plans	13 Statutory Retirement Third-party employee plan sick pay
646 ARABIAN CIRCLE	Local Tax Departments		
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MARYSVILLE OH 43040	a Employee's soc. sec. no		
f Employee's address and ZIP code  15 State   Employer's state I.D. No.   16 State wages, tips, etc.   17 State income tax	204-27-4884 18 Local wages, tips, etc.	19 Local income tax	20 Locality name
OH 54-148978 25000.00 784.10	25000.00	375.00	MARYSV
Form W-2 Wage and Tax Statement $2022$ Department of the Treasury-Internal Revenue Service	OMB # 1545-0008	Copy 2 To Be Filed With Employee's STA	(TE, CITT, or LOCAL Tax Departments
REV 12/20/22 OSP	MO- O In-three time for D 40		
b Employer's Identification number c Employer's name, address, and ZIP code 83-1115842	12a See instructions for Box 12	1 Wages, tips, other compensation 25000.00	3707.00
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555 METRO PL N	12c	5 Medicare wages and tips	6 Medicare tax withheld
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DUBLIN OH 43017			
e Employee's first name and initial Last name	-	9	10 Dependent care benefits
14687599		11 Nongualified plans	13 Statutory Retirement Third-party
GOPALAKRISHNAN RADHAKRISHNAN	Copy 2 for State, City, or	Trivorigualinea plans	13 Statutory Retirement Third-party employee plan sick pay
646 ARABIAN CIRCLE	Local Tax Departments	14 Other	
MARYSVILLE OH 43040	a Employee's soc. sec. no		
f Employee's address and ZIP code	204-27-4884		
15 State   Employer's state I.D. No.   16 State wages, tips, etc.   17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
OH 54-148978 25000.00 784.10	25000.00	375. <u>0</u> 0_	MARYSV
Form W-2 Wage and Tax Statement 2022 Department of the Treasury-Internal Revenue Service	OMB # 1545-0008	Copy 2 To Be Filed With Employee's STA	L ATE, CITY, or LOCAL Tax Departments
<u>-</u>			
b Employer's Identification number	12a See instructions for Box 12	1 Wages, tips, other compensation	2 Federal income tax withheld
c Employer's name, address, and ZIP code	\$	25000.00	3707.00
SAAS IT SERVICES	12b	3 Social security wages	4 Social security tax withheld
	\$   12c	25000.00	1550.00
555 METRO PL N		5 Medicare wages and tips 25000.00	362.50
	12d	7 Social security tips	8 Allocated tips
DUBLIN OH 43017	\$		
e Employee's first name and initial Last name	This information is being furnished to the Internal Revenue Service. If you are	9	10 Dependent care benefits
14687599	required to file a tax return, a negligence	11 Nongualified plans	12 0 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
GOPALAKRISHNAN RADHAKRISHNAN	penalty or other sanction may be imposed		13 Statutory Retirement Third-party
	penalty or other sanction may be imposed on you if this income is taxable and you fail to report it.		13 Statutory Retirement Third-party employee plan sick pay
646 ARABIAN CIRCLE	on you if this income is taxable and you fail to report it.  Copy C for Employee's	14 Other	employee plan sick pay
646 ARABIAN CIRCLE	on you if this income is taxable and you fail to report it.  Copy C for Employee's Records (see notice to	14 Other	employe plan sick pay
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