Copy B-To Be Filed With Employee's FEDERAL Tax Return.			Tax Year 2022 Copy 2-To Be Filed With Employee's State, City or Local Income Tax Return.			,	Tax Year <b>2022</b> OMB No. 1545-0008	
a. Employee's social security	1 Wages, tips, other comp.	2 Feder	ral income tax withheld	a. Employee's social security	1 Wages, tips, other comp.	2 Fed	eral income ta	
number ***-**-1143	\$146,311.17		\$15,420.19	number ***-**-1143	\$146,311.17			\$15,420.19
b. Employer ID number (EIN)	3 Social security wages	4 Socia	I security tax withheld	b. Employer ID number (EIN)	3 Social security wages	4 Soci	al security tax	withheld
04-1590850	\$147,000.00		\$9,114.00	04-1590850	\$147,000.00			\$9,114.00
d. Control number	5 Medicare wages and tips	6 Medic	care tax withheld	d. Control number	5 Medicare wages and tips	6 Med	icare tax with	held
10020575	\$161,253.62		\$2,338.18	10020575	\$161,253.62			\$2,338.18
7 Social security tips	8 Allocated tips	9	-	7 Social security tips	8 Allocated tips	9		
c. EMPLOYER'S name, address	s, and ZIP code			c. EMPLOYER'S name, addres	s, and ZIP code			
MASSACHUSETTS MI 1295 STATE STREET SPRINGFIELD, MA 01	JTUAL LIFE INSURANCE C 111	0		MASSACHUSETTS M 1295 STATE STREET SPRINGFIELD, MA 01	UTUAL LIFE INSURANCE C	0		
e. EMPLOYEE'S name, address F105 VENKATA RAGHAVEN 131 BUFFALOE SPRIN GARNER, NC 27529	IDRA SRIKAKULA <b>F10</b> 5	2-6448		e. EMPLOYEE'S name, addres F105 VENKATA RAGHAVE 131 BUFFALOE SPRII GARNER, NC 27529	NDRA SRIKAKULA <mark>F105</mark>	2-6448	i	
10 Dependent care benefits	11 Nonqualified plans	See ins	tructions for box 12	10 Dependent care benefits	11 Nonqualified plans			
13 Statutory employee Retirement plan X Third-party sick pay	14 Other MAPFML 212.39	12a 12b 12c 12d 12e	C \$480.17 D \$14,942.45 W \$6,830.00 DD \$19,363.44	13 Statutory employee Retirement plan X Third-party sick pay	14 Other MAPFML 212.39	12a 12b 12c 12d 12d 12e	C D W DD	\$480.17 \$14,942.45 \$6,830.00 \$19,363.44
15 State/Employer's state ID MA/041-590-850*04*	16 State wages, tips, etc. \$62,083.14	17 State	e income tax \$2,858.77	15 State/Employer's state ID MA/041-590-850*04*	16 State wages, tips, etc. \$62,083.14	17 Sta	te income tax	\$2,858.77
18 Local wages, tips, etc.	19 Local income tax	20 Loca	ality name	18 Local wages, tips, etc.	19 Local income tax	<b>20</b> Loc	ality name	2
Form <b>W-2 Wage and Tax S</b> i This information is being furnishe	latement Department of the Trea ed to the Internal Revenue Service.	sury - Int	ernal Revenue Service	Form W-2 Wage and Tax S	latement Department of the Trea	asury - Ir	iternal Reveni	ue Service
Conv.C.For EMDLOV	EE'S DECODDS (See Notice	•	2000	Com. 0 T- D- Ell 119	(ide Employees's Ottober 200			
,			Tax Year <b>2022</b>		ith Employee's State, City,		Tax Year <b>2022</b>	
to Employee on the b	Ţ		OMB No. 1545-0008	or Local Income Tax			OMB No. 1	
	1 Wages, tips, other comp.	2 Feder	al income tax withheld	a. Employee's social security	1 Wages, tips, other comp.	2 Fede	ral income tax	k withheld
number ***-**-1143 b. Employer ID number (FIN)	\$146,311.17 3 Social security wages	4 Cas'-	\$15,420.19	number ***-**-1143	\$146,311.17		l assumb to	\$15,420.19

• •	EE'S RECORDS (See Noti	ce	Tax Year <b>2022</b>	
to Employee on the I	back of Copy B.)		OMB No. 1545-0008	
<ul> <li>a. Employee's social security</li> </ul>	1 Wages, tips, other comp.	2 Federal income tax withheld		
number ***-**-1143	\$146,311.17	\$15,420.19		
<ul><li>b. Employer ID number (EIN)</li></ul>	3 Social security wages	4 Social security tax withheld		
04-1590850	\$147,000.00		\$9,114.00	
d. Control number	5 Medicare wages and tips	6 Medicare tax withheld		
10020575	\$161,253.62		\$2,338.18	
7 Social security tips	8 Allocated tips	9		
c. EMPLOYER'S name, addres	ss, and ZIP code			
SPRINGFIELD, MA 01	111			
e. EMPLOYEE'S name, addres	s, and ZIP code			
e. EMPLOYEE'S name, addres F105 VENKATA RAGHAVE! 131 BUFFALOE SPRIM GARNER, NC 27529	NDRA SRIKAKULA <b>F105</b>	2-6448		
F105 VENKATA RAGHAVEN 131 BUFFALOE SPRIN	NDRA SRIKAKULA <b>F105</b>		ctions for box 12	
F105 VENKATA RAGHAVEI 131 BUFFALOE SPRII GARNER, NC 27529	NDRA SRIKAKULA F105 NGS ST 1-866-66			
F105 VENKATA RAGHAVEI 131 BUFFALOE SPRII GARNER, NC 27529	NDRA SRIKAKULA F105 NGS ST 1-866-66	See instruc 12a C 12b D	\$480.17 \$14,942.45	
F105 VENKATA RAGHAVEN 131 BUFFALOE SPRIN GARNER, NC 27529  Dependent care benefits  Statutory employee	NDRA SRIKAKULA F105 NGS ST 1-866-66	See instruc 12a C 12b D 12c W	\$480.17 \$14,942.45 \$6,830.00	
F105 VENKATA RAGHAVEN 131 BUFFALOE SPRIN GARNER, NC 27529	NDRA SRIKAKULA F105 NGS ST 1-866-66	See instruc 12a C 12b D	\$480.17 \$14,942.45 \$6,830.00	
F105 VENKATA RAGHAVEN 131 BUFFALOE SPRIN GARNER, NC 27529  10 Dependent care benefits  3 Statutory employee Retirement plan X Third-party sick pay	NDRA SRIKAKULA F105 NGS ST 1-866-66	See instructure	\$480.17 \$14,942.45 \$6,830.00 \$19,363.44	
F105 VENKATA RAGHAVEN 131 BUFFALOE SPRIN GARNER, NC 27529  10 Dependent care benefits  3 Statutory employee Retirement plan	NDRA SRIKAKULA F105 NGS ST 1-866-66	See instruc 12a C 12b D 12c W 12d Di	\$480.17 \$14,942.45 \$6,830.00 \$19,363.44	
F105 VENKATA RAGHAVEN 131 BUFFALOE SPRIN GARNER, NC 27529  10 Dependent care benefits  3 Statutory employee Retirement plan X Third-party sick pay 5 State/Employer's state ID	NDRA SRIKAKULA F105 NGS ST  11 Nonqualified plans 14 Other MAPFML 212.39  16 State wages, tips, etc.	See instructure	\$480.17 \$14,942.45 \$6,830.00 D \$19,363.44	
F105 VENKATA RAGHAVEN 131 BUFFALOE SPRIN GARNER, NC 27529  10 Dependent care benefits  3 Statutory employee Retirement plan X Third-party sick pay 5 State/Employer's state ID	NDRA SRIKAKULA F105 NGS ST  11 Nonqualified plans 14 Other MAPFML 212.39  16 State wages, tips, etc.	See instructure	\$480.17 \$14,942.45 \$6,830.00 D \$19,363.44 come tax \$2,858.77	
F105 VENKATA RAGHAVEN 131 BUFFALOE SPRIN GARNER, NC 27529  10 Dependent care benefits  3 Statutory employee Retirement plan X Third-party sick pay 5 State/Employer's state ID MA/041-590-850*04*	NDRA SRIKAKULA F105 1-866-66  11 Nonqualified plans 14 Other MAPFML 212.39  16 State wages, tips, etc. \$62,083.14	See instruc 12a C 12b D 12c W 12d Dl 12e 17 State in	\$480.17 \$14,942.45 \$6,830.00 D \$19,363.44 come tax \$2,858.77	

or Local Income Tax	Return.		OMB No. 1	545-0008
a. Employee's social security	1 Wages, tips, other comp.	2 Fede	ral income tax	withheld
number ***-**-1143	\$146,311.17			\$15,420.19
<ul><li>b. Employer ID number (EIN)</li></ul>	3 Social security wages	4 Social security tax withheld		
04-1590850	\$147,000.00			\$9,114.00
d. Control number	5 Medicare wages and tips	6 Media	are tax withh	eld
10020575	\$161,253.62			\$2,338.18
7 Social security tips	8 Allocated tips	9		
c. EMPLOYER'S name, address	s, and ZIP code			
e. EMPLOYEE'S name, address F105 VENKATA RAGHAVEN 131 BUFFALOE SPRIN GARNER, NC 27529	IDRA SRIKAKULA <mark>F105</mark>	2-6448		
10 Dependent care benefits	11 Nonqualified plans	40-		4400.4
	14 Other	12a 12b	C D	
3 Statutory employee	·	12b 12c	D W	\$14,942.4
	14 Other	12b	D	\$480.1 \$14,942.4 \$6,830.0 \$19,363.4
3 Statutory employee Retirement plan	14 Other	12b 12c 12d 12e	D W	\$14,942.4 \$6,830.0
3 Statutory employee Retirement plan X Third-parly sick pay	14 Other MAPFML 212.39	12b 12c 12d 12e	D W DD	\$14,942.4 \$6,830.0 \$19,363.4
Statutory employee Retirement plan Third-party sick pay  5 State/Employer's state ID	14 Other MAPFML 212.39  16 State wages, tips, etc.	12b 12c 12d 12e	D W DD	\$14,942.4 \$6,830.0 \$19,363.4
Statutory employee Retirement plan Third-party sick pay  5 State/Employer's state ID	14 Other MAPFML 212.39  16 State wages, tips, etc.	12b 12c 12d 12e 17 State	D W DD	\$14,942.4 \$6,830.0 \$19,363.4
Statutory employee Retirement plan X Third-party sick pay  5 State/Employer's state ID MA/041-590-850*04*	14 Other MAPFML 212.39  16 State wages, tips, etc. \$62,083.14	12b 12c 12d 12e 17 State	D W DD	\$14,942.4 \$6,830.0
Statutory employee Retirement plan X Third-party sick pay  5 State/Employer's state ID MA/041-590-850*04*	14 Other MAPFML 212.39  16 State wages, tips, etc. \$62,083.14	12b 12c 12d 12e 17 State	D W DD	\$14,942.4 \$6,830.0 \$19,363.4