| b Employer's Identification number c Employer's name, address, and ZIP code | 12a See instructions for Box 12 | 1 Wages, tips, other compensation 134680.00 | 2 Federal income tax withheld 16111.60 |
|--|---|---|--|
| SOURCE CONSULTING LLC | 12b | 3 Social security wages | 4 Social security tax withheld |
| 4 LITHDOOMO LIAV | \$ 12c | 134680.00 5 Medicare wages and tips | 8350.16 6 Medicare tax withheld |
| 4 WINDSONG WAY | \$ 12d | 134680.00 7 Social security tips | 1952.86 |
| HOPKINTON MA 01748 | 1\$ | | |
| <u>Employee's first name and initial</u> <u>Last name</u> 2535534 | This information is being furnished to the Internal Revenue Service | 9 | 10 Dependent care benefits |
| RAJASHEKAR REDDY MATTA | O D. T. D. Eiledith | 11 Nonqualified plans | 13 Statutory Retirement Third-party employee plan sick pay |
| 12370 ALAMEDA TRACE CIRCLE | Copy B To Be Filed with Employee's FEDERAL | 14 Other | |
| APT 732 AUSTIN TX 78727 | Tax Return | | |
| | a Employee's soc. sec. no 476-99-3188 | | |
| f Employee's address and ZIP code 15 State | 18 Local wages, tips, etc. | 19 Local income tax | 20 Locality name |
| | | | |
| Form W-2 Wage and Tax Statement 2022 Department of the Treasury-Internal Revenue Service | OMB # 1545-0008 | Copy B To Be Filed V | With Employee's FEDERAL Tax Return |
| | | | |
| b Employer's Identification number c Employer's name, address, and ZIP code 20-2456070 | 12a See instructions for Box 12 | 1 Wages, tips, other compensation | 2 Federal income tax withheld 16111.60 |
| SOURCE CONSULTING LLC | \$ 12b | 134680.00 3 Social security wages | 4 Social security tax withheld |
| | \$ 12c | 134680.00 5 Medicare wages and tips | 8350.16 6 Medicare tax withheld |
| 4 WINDSONG WAY | \$ | 134680.00 | 1952.86 |
| HOPKINTON MA 01748 | 12d \$ | 7 Social security tips | 8 Allocated tips |
| e Employee's first name and initial Last name | - 1 | 9 | 10 Dependent care benefits |
| 2535534 | Copy 2 for State, City, or | 11 Nonqualified plans | 13 Statutory Retirement Third-party employee plan sick pay |
| RAJASHEKAR REDDY MATTA 12370 ALAMEDA TRACE CIRCLE | Local Tax Departments | | employee plan sick pay |
| APT 732 | | 14 Other | |
| AUSTIN TX 78727 | a Employee's soc. sec. no | | |
| f Employee's address and ZIP code | 476-99-3188 | 19 Local income tax | 20 Locality name |
| 15 State Employer's state I.D. No. 16 State wages, tips, etc. 17 State income tax | 18 Local wages, tips, etc. | | |
| 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 | The country or LOCAL Tax Departments |
| 2022 | | | |
| REV 01/03/23 OSP b Employer's Identification number 2.0 – 2.4 5.6 0.7 0 | 12a See instructions for Box 12 | 1 Wages, tips, other compensation | 2 Federal income tax withheld |
| c Employer's name, address, and ZIP code | \$ | 134680.00 | 16111.60 |
| SOURCE CONSULTING LLC | 12b | 3 Social security wages 134680.00 | 4 Social security tax withheld 8350.16 |
| 4 WINDSONG WAY | 12c | 5 Medicare wages and tips | 6 Medicare tax withheld |
| | 12d | 134680.00 7 Social security tips | 1952.86 8 Allocated tips |
| HOPKINTON MA 01748 e Employee's first name and initial Last name | | 9 | 10 Dependent care benefits |
| 2535534 | | 44 N | |
| RAJASHEKAR REDDY MATTA | Copy 2 for State, City, or | 11 Nonqualified plans | 13 Statutory Retirement Third-party employee plan sick pay |
| 12370 ALAMEDA TRACE CIRCLE APT 732 | Local Tax Departments | 14 Other | |
| AUSTIN TX 78727 | | | |
| f Employee's address and ZIP code | a Employee's soc. sec. no 476-99-3188 | | |
| 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 |
| | | | |
| 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 | ۹۱⊑, CII ۲, or LOCAL Tax Departments |
| 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 | \$ | 134680.00 | 16111.60 |
| SOURCE CONSULTING LLC | 12b s | 3 Social security wages 134680.00 | 4 Social security tax withheld 8350.16 |
| 4 WINDSONG WAY | 12c | 5 Medicare wages and tips 134680.00 | 6 Medicare tax withheld 1952.86 |
| | \$ 12d | 7 Social security tips | 8 Allocated tips |
| HOPKINTON MA 01748 e Employee's first name and initial Last name | This information is being furnished to the | 9 | 10 Dependent care benefits |
| 2535534 | Internal Revenue Service. If you are required to file a tax return, a negligence penalty or other sanction may be imposed | 11 Nongualified plane | 13 0 |
| RAJASHEKAR REDDY MATTA | on you if this income is taxable and you fail to report it. | II Honguainieu plans | 13 Statutory Retirement Third-party employee plan sick pay |
| 12370 ALAMEDA TRACE CIRCLE APT 732 | Copy C for Employee's Records (see notice to | 14 Other | |
| AUSTIN TX 78727 | Employee on back.) | | |
| f Employee's address and ZIP code | a Employee's soc. sec. no 476-99-3188 | | |
| 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 |
| Form W-2 Wage and Tax Statement 2022 Department of the Treasury-Internal Revenue Service | OMB # 1545-0008 | | |
| | | | Copy C For Employee's Records |