

<b>b Employer's Identification number</b>		26-1260542		<b>12a See instructions for Box 12</b>	<b>1 Wages, tips, other compensation</b>	<b>2 Federal income tax withheld</b>	
<b>c Employer's name, address, and ZIP code</b>		EA LEARN INC 100 METROPLEX DRIVE SUITE#103 EDISON NJ 08817		\$	81475.20	12807.17	
<b>e Employee's first name and initial</b>		Last name 3411628		<b>12b</b>	<b>3 Social security wages</b>	<b>4 Social security tax withheld</b>	
				\$	62355.20	3866.02	
<b>f Employee's address and ZIP code</b>		MONICA SATYANI 1790 MERCER PKWY, APT 1302 FARMERS BRANCH TX 75234		<b>12c</b>	<b>5 Medicare wages and tips</b>	<b>6 Medicare tax withheld</b>	
				\$	62355.20	904.15	
				<b>12d</b>	<b>7 Social security tips</b>	<b>8 Allocated tips</b>	
				\$			
				This information is being furnished to the Internal Revenue Service		<b>9</b>	
				<b>Copy B To Be Filed with Employee's FEDERAL Tax Return</b>		<b>10 Dependent care benefits</b>	
						<b>11 Nonqualified plans</b>	<b>13 Statutory employee</b> <input type="checkbox"/>
						<b>14 Other</b>	<b>Retirement plan</b> <input type="checkbox"/>
				<b>a Employee's soc. sec. no</b>		<b>Third-party sick pay</b> <input type="checkbox"/>	
				651-41-4455			
<b>15 State</b>	<b>Employer's state I.D. No.</b>	<b>16 State wages, tips, etc.</b>	<b>17 State income tax</b>	<b>18 Local wages, tips, etc.</b>	<b>19 Local income tax</b>	<b>20 Locality name</b>	

Form W-2 Wage and Tax Statement 2022 Department of the Treasury-Internal Revenue Service OMB # 1545-0008 Copy B To Be Filed With Employee's FEDERAL Tax Return

<b>b Employer's Identification number</b>		26-1260542		<b>12a See instructions for Box 12</b>	<b>1 Wages, tips, other compensation</b>	<b>2 Federal income tax withheld</b>	
<b>c Employer's name, address, and ZIP code</b>		EA LEARN INC 100 METROPLEX DRIVE SUITE#103 EDISON NJ 08817		\$	81475.20	12807.17	
<b>e Employee's first name and initial</b>		Last name 3411628		<b>12b</b>	<b>3 Social security wages</b>	<b>4 Social security tax withheld</b>	
				\$	62355.20	3866.02	
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				\$	62355.20	904.15	
				<b>12d</b>	<b>7 Social security tips</b>	<b>8 Allocated tips</b>	
				\$			
				This information is being furnished to the Internal Revenue Service		<b>9</b>	
				<b>Copy 2 for State, City, or Local Tax Departments</b>		<b>10 Dependent care benefits</b>	
						<b>11 Nonqualified plans</b>	<b>13 Statutory employee</b> <input type="checkbox"/>
						<b>14 Other</b>	<b>Retirement plan</b> <input type="checkbox"/>
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				651-41-4455			
<b>15 State</b>	<b>Employer's state I.D. No.</b>	<b>16 State wages, tips, etc.</b>	<b>17 State income tax</b>	<b>18 Local wages, tips, etc.</b>	<b>19 Local income tax</b>	<b>20 Locality name</b>	

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 STATE, CITY, or LOCAL Tax Departments

REV 01/03/23 OSP

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<b>c Employer's name, address, and ZIP code</b>		EA LEARN INC 100 METROPLEX DRIVE SUITE#103 EDISON NJ 08817		\$	81475.20	12807.17	
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				\$	62355.20	904.15	
				<b>12d</b>	<b>7 Social security tips</b>	<b>8 Allocated tips</b>	
				\$			
				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.		<b>9</b>	
				<b>Copy 2 for State, City, or Local Tax Departments</b>		<b>10 Dependent care benefits</b>	
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				<b>a Employee's soc. sec. no</b>		<b>Third-party sick pay</b> <input type="checkbox"/>	
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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.		<b>9</b>	
				<b>Copy C for Employee's Records</b> (see notice to Employee on back.)		<b>10 Dependent care benefits</b>	
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Form W-2 Wage and Tax Statement 2022 Department of the Treasury-Internal Revenue Service OMB # 1545-0008 Copy C For Employee's Records