

DETACH BEFORE MAILING  
MANUFACTURED ON OCR LASER BOND PAPER USING HEAT RESISTANT INKS

<b>a Employee's SSN</b> 789-67-9438		<b>b Employer identification number</b> 26-0208000		<b>Copy B To Be Filed With</b> <b>Employee's FEDERAL Tax Return</b>		OMB No. 1545-0008			
<b>c Employer's name, address, and ZIP code</b>  BROADMOOR SOLUTIONS INC 937 FRITZTOWN ROAD SINKING SPRING, PA 19608				<b>1 Wages, tips, other compensation</b> 74667.71		<b>2 Federal income tax withheld</b> 10703.75			
				<b>3 Social security wages</b> 75942.71		<b>4 Social security tax withheld</b> 4708.45			
				<b>5 Medicare wages and tips</b> 75942.71		<b>6 Medicare tax withheld</b> 1101.17			
				<b>7 Social security tips</b>		<b>8 Allocated tips</b>		<b>9</b>	
				<b>10 Dependent care benefits</b>		<b>11 Nonqualified plans</b>		<b>12a Code See inst. for box 12</b> D 22 1275.00	
<b>d Control number</b> 1700				<b>12b Code</b>		<b>12c Code</b>			
<b>e Employee's name, address, and ZIP code</b>  HIMABINDU KATIPALLI 600 READING BLVD EDISON, NJ 08817				<b>13</b>		<b>14 Other UI/WF/SWF</b>			
				Statutory employee		DI		168.95	
				Retirement plan		NJ FLI		106.42	
				Third-party sick pay		PA LST		13.02	
<b>15 State</b> NJ		<b>Employer's state I.D. no.</b> 260208000000		<b>16 State wages, tips, etc.</b> 74667.71		<b>17 State income tax</b> 3486.67			
						<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

<b>a Employee's SSN</b> 789-67-9438		<b>b Employer identification number</b> 26-0208000		<b>Copy 2 To Be Filed With Employee's</b> <b>State, City, or Local Tax Return</b>		OMB No. 1545-0008			
<b>c Employer's name, address, and ZIP code</b>  BROADMOOR SOLUTIONS INC 937 FRITZTOWN ROAD SINKING SPRING, PA 19608				<b>1 Wages, tips, other compensation</b> 74667.71		<b>2 Federal income tax withheld</b> 10703.75			
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Department of the Treasury - Internal Revenue Service

<b>a Employee's SSN</b> XXX-XX-9438		<b>b Employer identification number</b> 26-0208000		<b>Copy C For EMPLOYEE'S RECORDS</b>		(See Notice to Emp. on back of Copy B.) OMB No. 1545-0008			
<small>This information is being furnished to the IRS. 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.</small>									
<b>c Employer's name, address, and ZIP code</b>  BROADMOOR SOLUTIONS INC 937 FRITZTOWN ROAD SINKING SPRING, PA 19608				<b>1 Wages, tips, other compensation</b> 74667.71		<b>2 Federal income tax withheld</b> 10703.75			
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