Form **1095-C**
Department of the Treasury
Internal Revenue Service

Employer-Provided Health Insurance Offer and Coverage

▶ **Information about Form 1095-C and its separate instructions is at *www.irs.gov/form1095c***

☐ VOID
☐ CORRECTED

600120
OMB No. 1545-2251
2023

Part I Employee

Field	Value
1 Name of employee (first name, middle initial, last name)	Abhimanya Kilaru
2 Social security number (SSN)	341-59-2292
3 Street address (including apartment no.)	6 Highpoint Circle Apt#805
4 City or town	Quincy
5 State or province	MA
6 Country and ZIP or foreign postal code	02169

Applicable Large Employer Member (Employer)

Field	Value
7 Name of employer	ORGANOGENESIS INC
8 Employer Identification Number (EIN)	04-2871690
9 Street address (including room or suite no.)	150 DAN ROAD
10 Contact Telephone Number	(781) 575-0775
11 City or town	CANTON
12 State or province	MA
13 Country and ZIP or foreign postal code	02021

Part II Employee Offer and Coverage

Employee's Age on January 1

Plan Start Month: 01

	All 12 Months	Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec
14 Offer of Coverage (enter required code)	1E												
15 Employee Required Contribution (see instructions)	$150.67												
16 Section 4980H Safe Harbor and Other Relief (enter code, if applicable)	2C												
17 ZIP Code													

Part III Covered Individuals

If Employer Provided self-insured coverage check the box and enter the information for each covered individual ☐

	(a) Name of covered individual(s) First name, middle initial, last name	(b) SSN	(c) DOB (if SSN is not available)	(d) Covered all 12 months	(e) Months of Coverage Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec
18				☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
19				☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
20				☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
21				☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
22				☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
23				☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐

For Privacy Act and Paperwork Reduction Act Notice, see separate instructions.

ORGANOGENESIS INC
150 DAN ROAD
CANTON, MA 02021

34090 502940 **1095-C**
Abhimanya Kilaru
6 Highpoint Circle Apt#805
Quincy, MA 02169