

22222		a Employee's social security number XXX-XX-8434		OMB No. 1545-0008		
b Employer identification number (EIN) 83-3750719			1 Wages, tips, other compensation 88,169.80		2 Federal income tax withheld 11,799.71	
c Employer's name, address, and ZIP code THINKLUSIVE INC THINKLUSIVE INC 1100 CORNWALL RD MONMOUTH JUNCTION, NJ 08852			3 Social security wages 11,037.00		4 Social security tax withheld 684.29	
			5 Medicare wages and tips 11,037.00		6 Medicare tax withheld 160.04	
			7 Social security tips		8 Allocated tips	
d Control number 68					10 Dependent care benefits	
e Employee's first name and initial Last name suff.  Samatha Reddy Burri  103 Ballyliffen Ln  Cary, NC 27519			11 Nonqualified plans		12a See instructions for box 12	
			13 Statutory employee Retirement plan Third-party sick pay <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		12b	
			14 Other NJ FLI 7.87 NJ SUI 55.76		12c	
					12d	
f Employee's address and ZIP code						
15 State Employer's state ID number		16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
NC   601263013		75,049.80	3,127.00			
NJ   833-750-719/000		13,120.00	546.92			

Form **W-2** Wage and Tax Statement  
Copy 1- For State, City, or Local Tax Department

2023

Department of the Treasury- Internal Revenue Service

AWW2-1

22222		a Employee's social security number		OMB No. 1545-0008		
b Employer identification number (EIN)			1 Wages, tips, other compensation		2 Federal income tax withheld	
c Employer's name, address, and ZIP code			3 Social security wages		4 Social security tax withheld	
			5 Medicare wages and tips		6 Medicare tax withheld	
			7 Social security tips		8 Allocated tips	
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e Employee's first name and initial Last name suff.			11 Nonqualified plans		12a See instructions for box 12	
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			14 Other		12c	
					12d	
f Employee's address and ZIP code						
15 State Employer's state ID number		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  
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