Copy B—To Be Filed With Employee's FEDERAL Tax Return. OMB No. 1545-0008									
a Employee's SSN		2 Federal income tax withheld 12358.25							
130-13-4561	3 Social security wages 4 Social security tax withheld								
b Employer ID no. (EIN)	90000.00 5580.0								
20-8524493	90000.00	6 Medicare tax withheld 1305.00							
c Employer's name, addre	ess, and ZIP code								
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JACKSON HEIGHTS, NY 11372									
d Control number 20269									
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Third-party sick pay		12d							
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Form W-2 Wage and Tax This information is being furn	s Statement ished to the Internal Revenue Service.	Dept. of the Treasury - IRS							

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BONGOSYS INC.									
73-12 35TH AVENUE A45									
JACKSON H	EIGHT	rs, NY 11372	2						
d Control number									
20269									
e Employee's name, address, and ZIP code									
RAMCHAND DAMACHARLA									
5047 N KENMORE AVE, TOWNHOUSE C CHICAGO, IL 60640									
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18 Local wages, tips, etc. Form W-2 Wage and Tax			Dept. of the Treasury - IRS						

OMB No.

OMB No.

1545-0008

2023

2 Federal income tax withheld

12358.25

1545-0008

2023

2 Federal income tax withheld

Copy 2—To Be Filed With Employee's State,

Copy 2-To Be Filed With Employee's State,

1 Wages, tips, other comp.

City, or Local Income Tax Return

a Employee's SSN

1 Wages, tips, other comp.

90000.00

City, or Local Income Tax Return

a Employee's SSN

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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.

Copy C-For EMPLOYEE'S RECORDS (See Notice to Employee) OMB No. 1545-0008								
(See Notice to Emp			1545-0008					
a Employee's SSN	1 1	/ages	s, tips, other comp. 9000.00	2 F	2 Federal income tax withheld 12358.25			
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b Employer ID no. (EIN)			90000.00		5580.00			
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73-12 35TH AVENUE A45								
JACKSON HEIGHTS, NY 11372								
d Control number 20269								
e Employee's name, address, and ZIP code RAMCHAND DAMACHARLA 5047 N KENMORE AVE, TOWNHOUSE C CHICAGO, IL 60640								
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Form W-2 Wage and Tax Statement Dept. of the Treasury - IRS

90000.00 12358.25 130-13-4561 3 Social security wages 4 Social security tax withheld <u>5580.00</u> **b** Employer ID no. (EIN) 90000.00 6 Medicare tax withheld 5 Medicare wages and tips 20-8524493 90000.00 1305.00 c Employer's name, address, and ZIP code BONGOSYS INC. 73-12 35TH AVENUE A45 JACKSON HEIGHTS, NY 11372 d Control number 20269 e Employee's name, address, and ZIP code RAMCHAND DAMACHARLA 5047 N KENMORE AVE, TOWNHOUSE C CHICAGO, IL 60640 7 Social security tips 8 Allocated tips 9 10 Dependent care benefits 11 Nonqualified plans 12a 13 Statutory employee 14 Other 12b NYSDI 30.00 Retirement plan NYPFL 384.00 12c Third-party sick pay 12d NY 20-8524493 90000.00 4436.27 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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