

| Copy B To Be Filed With Employee's FEDERAL Tax Return | | 2023 OMB No. 1545-0008 | |
|---|---|---|---------|
| a Employee's social security number 513-45-4763 | 1 Wages, tips, other comp. 57394.30 | 2 Federal income tax withheld 6177.20 | |
| | 3 Social security wages 57394.30 | 4 Social security tax withheld 3558.44 | |
| b Employer ID number 47-5573420 | 5 Medicare wages and tips 57394.30 | 6 Medicare tax withheld 832.20 | |
| | c Employer's name, address, and ZIP code TrueBinding INC 300 Lincoln Centre Dr 200 Foster City, CA 94404 | | |
| d Control Number 106292 111 | | | |
| e Employee's name, address, and ZIP code Kamna Lakshmi Sreejith 1083 Shell Blvd APT 4 Foster City, CA 94404 | | | |
| 7 Social security tips | 8 Allocated tips | 9 Advance EIC payment | |
| 10 Dependent care benefits 83.30 | 11 Nonqualified plans | 12a Code DD | 3182.20 |
| 13 Statutory employee | 14 Other CASDI-E 516.54 | 12b Code | |
| Retirement plan | | 12c Code | |
| 3rd party sick pay | | 12d Code | |
| CA 056-3175-9 | 57394.30 | 2483.30 | |
| 15 State Emplr.'s state I.D. # | 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 Dept. of the Treasury - IRS
This information is being furnished to the Internal Revenue Service

| Copy C For EMPLOYEE'S RECORDS (See Notice to Employee on back of Copy B.) | | 2023 OMB No. 1545-0008 | |
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Form W-2 Wage and Tax Statement Dept. of the Treasury - IRS
This information is being furnished to the Internal Revenue Service. If you are required to file a tax return, a negligence penalty/other sanction may be imposed on you if this income is taxable and you fail to report it.

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Form W-2 Wage and Tax Statement Dept. of the Treasury - IRS

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TrueBinding INC
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Foster City, CA 94404

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