

Employer's Name, Address and ZIP Code <b>METLIFE AGENT / LONZA USA, INC.</b> <b>5950 AIRPORT ROAD</b> <b>ORISKANY NY 13424</b>		1. Wages, Tips, Other Compensation <b>10,749.96</b>	2. Federal Income Tax Withheld <b>950.37</b>	
Group/Sub/Branch <b>0317858 0011 0001</b>		Employer's Identification Number <b>13-5581829</b>		3. Social Security Wages <b>10,749.96</b>
Employee's Name, Address and ZIP Code <b>SRILATHA YARAVA</b> <b>2002 GRANITE PASS DR</b> <b>PEARLAND TX 77581</b>		5. Medicare Wages <b>10,749.96</b>	4. Social Security Tax Withheld <b>666.50</b>	
15. State Employers State ID No.		16. State Wages, Tips, Etc.		6. Medicare Tax Withheld <b>155.89</b>
17. State Tax Withheld		20. Locality Name		14. TIER 1 EMPLOYEE TAX: TIER 1 EMPLOYEE MEDICARE TAX:
12a. (J) Excluded From Wages <b>19.27</b>		14a. Included in Wages <b>10,749.96</b>		14b. Total Benefits Paid <b>10,769.23</b>
13. Statutory employee <input type="checkbox"/>		Retirement plan <input type="checkbox"/>		18. Local Wages, Tips, Etc.
		Third-party sick pay <input checked="" type="checkbox"/>		19. Local Income Tax

Copy C, for employee's records. 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 to you and you fail to report it.

Department of the Treasury  
Internal Revenue Service

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Copy B, to be filed with employee's Federal tax return

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Please discard this W-2 copy

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