Form W-2 Wage and Tax Statement 2023	Department of the Treasu	ry-Internal Revenue Service	OMB # 1545-0008	Copy B To Be Filed V	With Employee's FEDERAL Tax Return
<u>NJ</u> <u>465-741-051/000</u>	16338.47	283.10			
15 State Employer's state I.D. No. 16 S		17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
f Employee's address and ZIP code			077-08-4633		1221
EDISON NJ 08817		a Employee's soc. sec. no			
			Tax Return	NJ SUI EE	69.44
2404 SIRAWBERRI CI		Employee's FEDERAL	14 Other		
2404 STRAWBERRY CT			Copy B To Be Filed with		
10805213 ANANTHA NAYAGI RADHAKRISHNAN				13 Statutory Retirement Third-party plan sick pay	
		Internal Revenue Service	11 Nongualified plans	10	
e Employee's first name and initial	Last name		This information is being furnished to the	9	10 Dependent care benefits
EDISON NJ 08817	I		\$		
EDICON NI 00017			12d	7 Social security tips	8 Allocated tips
145 TALMADGE RD STE 18		\$			
		12c	5 Medicare wages and tips	6 Medicare tax withheld	
11 IIIIIOIIID			\$		
IP-HEIGHTS			12b	3 Social security wages	4 Social security tax withheld
c Employer's name, address, and ZIP code	10 5711051		\$	16338.47	1025.97
b Employer's Identification number	46-5741051		12a See Instructions for Box 12	1 Wages, tips, other compensation	2 Federal income tax withheid

b Employer's Identification number 5 Final Action 1 and 1 a	12a See instructions for Box 12	1 Wages, tips, other compensation	2 Federal income tax withheld
c Employer's name, address, and ZIP code	\$	16338.47	1025.97
IP-HEIGHTS	12b	3 Social security wages	4 Social security tax withheld
	\$		
145 TALMADGE RD STE 18	12c	5 Medicare wages and tips	6 Medicare tax withheld
IIS IALMADOE RD SIE IO	\$		
EDISON NJ 08817	12d	7 Social security tips	8 Allocated tips
	\$		1
e Employee's first name and initial Last name		9	10 Dependent care benefits
10805213			
	Copy 2 for State, City, or	11 Nonqualified plans	13 Statutory Retirement Third-party employee plan sick pay
ANANTHA NAYAGI RADHAKRISHNAN			employee plan sick pay
2404 STRAWBERRY CT	Local Tax Departments	14 Other	
		NJ SUI EE	69.44
EDISON NJ 08817			
EDISON NO 0001/	a Employee's soc. sec. no		
f Employee's address and ZIP code	077-08-4633		
15 State Employer's state I.D. No. 16 State wages, tips, etc. 17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
NJ 465-741-051/000 16338.47 283.10			
Form W-2 Wage and Tax Statement 2023 Department of the Treasury-Internal Revenue Service	OMB # 1545-0008	Copy 2 To Be Filed With Employee's ST	ATE, CITY, or LOCAL Tax Departments

REV 12/24/23 OSP

<u>b Employer's Identification number</u> c Employer's name, address, and ZIP code, 46-5741051	12a See instructions for Box 12	1 Wages, tips, other compensation	2 Federal income tax withheld
c Employer's name, address, and ZIP code	\$	16338.47	1025.97
IP-HEIGHTS	12b	3 Social security wages	4 Social security tax withheld
	ls		
145 MAINARAR DD GWR 10	12c	5 Medicare wages and tips	6 Medicare tax withheld
145 TALMADGE RD STE 18	\$		
	12d	7 Social security tips	8 Allocated tips
EDISON NJ 08817	1\$		
e Employee's first name and initial Last name		9	10 Dependent care benefits
10805213			
ANANTHA NAYAGI RADHAKRISHNAN	Copy 2 for State, City, or	11 Nongualified plans	13 Statutory Retirement Third-party plan sick pay
	Local Tax Departments		
2404 STRAWBERRY CT	Local Tax Departments	14 Other	
		NJ SUI EE	69.44
EDISON NJ 08817			
	a Employee's soc. sec. no		
f Employee's address and ZIP code	077-08-4633		
15 State Employer's state I.D. No. 16 State wages, tips, etc. 17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
NJ 465-741-051/000 16338.47 283.10		L	
Form W-2 Wage and Tax Statement 2023 Department of the Treasury-Internal Revenue Service	OMB # 1545-0008	Copy 2 To Be Filed With Employee's ST	ATE, CITY, or LOCAL Tax Departments

b Employer's Identification number 46-5741051	12a See instructions for Box 12	1 Wages, tips, other compensation	2 Federal income tax withheld
c Employer's name, address, and ZIP code	\$	16338.47	1025.97
IP-HEIGHTS	12b	3 Social security wages	4 Social security tax withheld
	\$		
145 MADOR DD OME 10	12c	5 Medicare wages and tips	6 Medicare tax withheld
145 TALMADGE RD STE 18	\$		
	12d	7 Social security tips	8 Allocated tips
EDISON NJ 08817	\$		
e Employee's first name and initial Last name	This information is being furnished to the	9	10 Dependent care benefits
10805213	Internal Revenue Service. If you are required to file a tax return, a negligence		
	penalty or other sanction may be imposed	11 Nongualified plans	13 Statutory Retirement Third-party plan sick pay
ANANTHA NAYAGI RADHAKRISHNAN	on you if this income is taxable and you fail to report it.		employee plan sick pay
2404 STRAWBERRY CT	Copy C for Employee's		
	Records (see notice to	14 Other NJ SUI EE	69.44
	Employee on back.)	NO BOI HE	09.11
EDISON NJ 08817	a Employee's soc. sec. no	-	
	077 - 08 - 4633	-	
f Employee's address and ZIP code			
15 State Employer's state I.D. No. 16 State wages, tips, etc. 17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
NJ 465-741-051/000 16338.47 283	0		

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