Copy B To Be Filed With Employee's FEDERAL Tax Return 2023 OMB No. 1545-000						
a Employee's social	1 Wage	1 Wages, tips, other comp. 2 Federal income tax with				
security number		42021.02		5374.87		
130-91-7490	3 Socia	al security wages	4.9	4 Social security tax withheld		
<b>b</b> Employer ID number						
13-4258197	5 Medi	Medicare wages and tips		6 Medicare tax withheld		
c Employer's name, add	ress, and ZIF	ode code				
OM Partners	USA	Inc				
2727 Paces	Ferry	Rd				
Bldg1 Ste 1	.750					
	Atlanta, GA 30339					
d Control Number						
50896 0375						
e Employee's first name	and initial	Last name				
Nihar Shah						
		Tano				
2722 Lake Ferry Lane						
Atlanta, GA						
f Employee's address, and ZIP code 7 Social security tips 8 Allocated tips 9						
1 Coolai Goodiity apo	"	r moodica tipo		•		
10 Dependent care benefits		11 Nonqualified plans		2a Code See ins	t. for box 12	
				W 58.88		
13 Statutory employee	14 Other	4 Other		2b Code		
	DENTA					
Retirement plan S12 VIS		<b>5</b> 701.52		12c Code		
GA 2270603	  - TO	42021.0		21	74.74	
GA 22/0003	-00	42021.0	<u> </u>		/4./4	
15 State Emplr.'s state I.	16 State wages, tips, etc	<b>.</b>	17 State income tax			
		19 Local income tax		20 Locality name		

Form W-2 Wage and Tax Statement
This information is being furnished to the Internal Revenue Service Dept. of the Treasury - IRS

2 To Be Filed With Employee's State OMP No

Copy 2 To Be Filed W City, or Local Income	202	OMB No. 1545-0008				
a Employee's social	1 Wages	s, tips, other comp.	2 Federal income tax withheld			
security number		42021.02	5374.87			
130-91-7490	3 Social	security wages	4 Social security tax withheld			
<b>b</b> Employer ID number	1					
13-4258197	5 Medica	are wages and tips	6 Medicare ta	x withheld		
c Employer's name, addre	c Employer's name, address, and ZIP code					
OM Partners						
2727 Paces I	Terry	Rd				
Bldg1 Ste 17	750					
Atlanta, GA	30339	)				
d Control Number						
	50896 0375					
e Employee's first name a	nd initial	Last name				
Nihar Shah	1					
2722 Lake Ferry Lane Atlanta, GA 30339						
		1				
f Employee's address, and ZIP code  7 Social security tips 8 Allocated tips 9						
10 Dependent care benefits		lonqualified plans	12a Code	See inst. for box 12		
			M	58.88		
13 Statutory employee 14 Other			12b Code			
	DENTAL HDHP	58.16 153.58				
Retirement plan	S125	701.52	12c Code			
	<b>VIS</b> 11.62					
Third-party sick pay			12d Code			
GA 2270603-JO		42021.02	2174.74			
15 State Emplr.'s state I.D. #		16 State wages, tips, etc.	17 State income tax			
18 Local wages, tips, etc. 19		ocal income tax	20 Locality name			
F W 0 W 7 0		of the Tonas and 100				
Form W-2 Wage and Tax St	atement		Dept.	of the Treasury - IRS		

Copy C For EMPLOY (See Notice to Employed)	yee on ba	ick of Copy B.)		2023	OMB No. 1545-0008	
a Employee's social	1 Wage:	s, tips, other comp.	2 F	2 Federal income tax withheld		
security number		42021.02		5374.87		
130-91-7490	3 Social	security wages	<b>4</b> S	4 Social security tax withheld		
<b>b</b> Employer ID number	E Maratia			I - di 4 dal- l-	. 1.1	
13-4258197	5 iviedic	are wages and tips	eges and tips 6 Medicare tax withheld			
<b>c</b> Employer's name, addre	ess, and ZIP	code				
OM Partners	USA I	inc				
2727 Paces	Ferry	Rd				
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Atlanta, GA	_					
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7 Social security tips		8 Allocated tips		)		
10 Dependent care benefit	s 11 N	11 Nonqualified plans		a Code See ins	t for hox 12	
10 Dependent date benefit					8.88	
13 Statutory employee	14 Other	4 Other  DENTAL 58.16  HDHP 153.58  S125 701.52  VIS 11.62		12b Code		
Retirement plan	S125			12c Code		
Third-party sick pay	VIS			12d Code		
GA 2270603-JO		42021.02		21	74.74	
15 State Emplr.'s state I.D. #		16 State wages, tips, etc.	17 State income tax		tax	
18 Local wages, tips, etc.				Locality name		
Form W-2 Wage and Tax S				Dent of the		

Form W-2 Wage and Tax Statement

Dept. of the Treasury - IRS
This information is being furnished to the IRS. 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.

Extra Employee Cop	у		20	OMB No. 1545-0008	
a Employee's social security number		s, tips, other comp. 42021.02	2 Federal income tax withheld 5374.87		
130-91-7490	3 Social	security wages	4 Social security tax withheld		
<b>b</b> Employer ID number	5 Medicare wages and tips 6 Medicare tax withheld				
13-4258197	5 Medic	are wages and tips	6 Medicare t	ax withheld	
c Employer's name, addre	ss, and ZIP	code			
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Retirement plan S12					
Third-party sick pay	VIS	VIS 11.62			
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GA 2270603-	<b>-</b> JO	42021.02		2174.74	
15 State Emplr.'s state I.D. #		16 State wages, tips, etc.   17 State income   19 Local income tax   20 Locality name			
18 Local wages, tips, etc.		Local Income tax	20 Locality name		
			l		