

Copy B--To Be Filed With Employee's FEDERAL Tax Return			OMB No. 1545-0008		
This information is being furnished to the Internal Revenue Service.					
a. Employee's social security number XXX-XX-6425	1. Wages, tips, other compensation 12000.00	2. Federal income tax withheld 1005.72			
b. Employer ID number (EIN) 85-1194501	3. Social security wages	4. Social security tax withheld			
d. Control number BI17-12	5. Medicare wages and tips	6. Medicare tax withheld			
c. Employer's name, address, and ZIP code Irradiant Technologies Inc 4 Shady Hill Sq Cambridge, MA 02138					
e. Employee's name, address, and ZIP code Devansh Amish Mehta 525 Newbury Street Apt 4 Boston, MA 02215					
7. Social security tips	8. Allocated tips	9. 			
10. Dependent care benefits	11. Nonqualified plans	12a. Code See inst. for Box 12			
13. Statutory employee	14. Other MAPFML 38.16	12b. Code			
Retirement plan		12c. Code			
Third-party sick pay		12d. Code			
15. State MA	Employer's state ID number WTH-20352388-002	16. State wages, tips, etc. 12000.00	17. State income tax 539.25		
18. Local wages, tips, etc.	19. Local income tax	20. Locality name			

Form W-2 Wage and Tax Statement **2023** Department of the Treasury - Internal Revenue Service

Copy 2--To Be Filed With Employee's State, City, or Local Income Tax Return			OMB No. 1545-0008		
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Form W-2 Wage and Tax Statement **2023** Department of the Treasury - Internal Revenue Service

Copy C--For EMPLOYEE'S RECORDS(See Notice to Employee.)			OMB No. 1545-0008		
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.					
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