Copy B To Be Filed with Employee's FEDERAL Tax Return.			201 OMB	9 No. 1545-0008	Copy 2 To Be Filed With Employee's State, City, or Local Income Tax Return.					ON	2019 OMB No. 1545-0008		
a Employee's SSN	1 Wag	es, tips, oth	er comp. 2	ederal	income tax withheld 11220.00	a Emple	oyee's SSN	1 Wage	s, tips, oth	er comp. 1000.00	2 Feder	al income tax withheld 11220.00	
538-63-3705	3 Socia	al security v		Social se	ecurity tax withheld	538-	63-3705	3 Socia	I security v	•	4 Social	security tax withheld	
b Employer ID no. (EIN)			10000.00	Madiane	6820.00	b Emplo	yer ID no. (EIN)	5 Medi	L care wages	10000.00	6 Medic	6820.00 are tax withheld	
22-3786614				1595.00		1	3786614	110000.0			1595.00		
c Employer's name, a FIRST TEK	ddress, a	nd ZIP code C	e			c Empl	oyer's name, add RST TEK,	dress, a IN	nd ZIP cod C	e			
1551 S WASHINGTON AVENUE, SUITE: Ϥηζα							1551 S WASHINGTON AVENUE, SUITE:						
PISCATAWA	Y			NJ	08854	PISCATAWAY					NJ	08854	
d Control number		***************************************				d Conti	rol number						
e Employee's name, address, and ZIP code Suff. VIKRAM SELVAMANI 2 RADIO AVE APT 7 SECAUCUS NJ 07094						e Employee's name, address, and ZIP code VIKRAM SELVAMANI 2 RADIO AVE APT 7 SECAUCUS NJ 07094						Suff.	
7 Social security tips 8 Allocated tips			9		7 Social security tips			8 Allocated tips		9			
10 Dependent care benefits		11 Nonqualified plans		12a Code See inst. for box 12		10 Dependent care benefits		fits	s 11 Nonqualified plans		12a (12a Code See inst. for box 12	
13	140	ther		12b Co	ode	13		14 0			12b	Code	
		31.20	12c Code		1			Y-SDI 31.20 Y-FLI 107.97		1	Code		
Retirement Plan NY		Y-FLI 107.97		12d Code		Retirement Plan		1/17 -	NI-FHI 107.57			12d Code	
Third-party sick pay				120 00	ode	Third-par	ty sick pay						
NY 223786			110000	0.00 6400.32		NY	2237866	86614		110000.		6400.32	
15 State Employer's	state ID	number	16 State wages, tips,	etc.	17 State income tax	15 State	Employer's stat	te ID nu	nber	16 State wages, ti	ps, etc.	17 State income tax	
18 Local wages, tips, etc. 19 Local income tax		20 Locality name		18 Local wages, tips, etc.		c.	19 Local income tax 2		20 Loca	20 Locality name			
Form W-2 Wage and This information is being fu	Fax State rnished to	ment the Internal Re	evenue Service.	<u>!</u>	Dept. of the Treasury - IRS	Form V	V-2 Wage and Ta	ax State	ment			Dept. of the Treasury - IR	
This information is being fu	rnished to	the Internal R	evenue Service. If you are	required to	o file a tax return, a negligence				RE	V 01/15/20 QBDT			
penalty or other sanction may be imposed on you if this income is taxable and you come to taxable and				20		Copy 2 To Be Filed With Employee's State, City, or Local Income Tax Return. 2019 OMB No. 1545-0008							

1595.00

Suff.

 Copy C For EMPLOYEE'S RECORDS. (See Notice to Employees).
 2019 (OMB No. 1545-0008)

 a Employee's SSN
 1 Wages, tips, other comp. 110000.00
 2 Federal income tax withheld

 538-63-3705
 3 Social security wages
 4 Social security tax withheld

 b Employer ID no. (EIN)
 110000.00
 6820.00

 5 Medicare wages and tips
 6 Medicare tax withheld

110000.00

c Employer's name, address, and ZIP code FIRST TEK, INC

1551 S WASHINGTON AVENUE, SUITE:

PISCATAWAY NJ 08854

d Control number

SECAUCUS

22-3786614

e Employee's name, address, and ZIP code VIKRAM SELVAMANI 2 RADIO AVE APT 7

7 Social security tips 8 Allocated tips 9

10 Dependent care benefits 11 Nonqualified plans 12a Code See inst. for box 12

NJ

07094

Third-party sick pay

NY 223786614

110000.00

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15 State Employer's state ID number 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 Form W-2 Wage and Tax Statement

Copy 2 To Be Fi City, or Local Inc	led W	th Emp	loyee's State,	2019 OMB No. 1545-0008					
	1 Wage	s, tips, oth	er comp.	2 F		income tax withheld			
a Employee's SSN			10000.00	11220.00					
538-63-3705	3 Social security wages				4 Social security tax withheld				
		1:	10000.00	6820.00					
b Employer ID no. (EIN)	5 Medi	care wages	and tips	6 Medicare tax withheld					
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7 Social security tips		8 Allocate	ed tips	Ş)				
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Statutory employee Retirement Plan	1	IY-SDI 31.20 IY-FLI 107.97				- 1 an O. a.			
Third-party sick pay					12d Code				
NY 223786	614	11000			00	6400.32			
15 State Employer's sta	ite ID nui	mber	ps, e	tc.	17 State income tax				
18 Local wages, tips, e	tc.	19 Local income tax			20 Locality name				

Dept. of the Treasury - IRS