

22222	Void <input type="checkbox"/>	a Employee's social security number 714-89-7196	OMB No. 1545-0008
b Employer identification number (EIN) 46-4239227	1 Wages, tips, other compensation 1,9749.00		
c Employer's name, address, and ZIP code RACEDOG LTD 100 E CAMPUS VIEW BLVD STE 250 WORTHINGTON OH 43235		3 Social security wages	2 Federal income tax withheld 492.00
d Control number	9 Verification code	5 Medicare wages and tips	4 Social security tax withheld
e Employer's name, address, and ZIP code RADHIKA CHALAMALASETTY 908 MEADOW CREEK DR APT 4084 IRVING TX 75038		7 Social security tips	6 Medicare tax withheld
Suff. CHALAMALASETTY		11 Nonqualified plans	8 Allocated tips
13 Statutory employee <input type="checkbox"/>		Retirement plan <input type="checkbox"/>	10 Dependent care benefits
14 Other		Trust-party sect. pay <input type="checkbox"/>	12a See instructions for box 12
15 State		16 State wages, tips, etc.	12b
Employer's state ID number		17 State income tax	12c
16 State wages, tips, etc.		18 Local wages, tips, etc.	12d
17 State income tax		19 Local income tax	20 Locality name

2017

Form W-2 Wage and Tax Statement

Department of the Treasury—Internal Revenue Service
For Privacy Act and Paperwork Reduction Act Notice, see separate instructions.

Copy 1—For State, City, or Local Tax Department
Copy D—For Employer.