

Form **W-2 Wage and Tax Statement** 2019

c Employer's name, address, and ZIP code INSURANCE SERVICES OFFICE, INC 545 WASHINGTON BLVD. JERSEY CITY NJ 07310		7 Social security tips	1 Wages, tips, other compensation 61357.00	2 Federal income tax withheld 9579.46		
		8 Allocated tips	3 Social security wages	4 Social security tax withheld		
		9	5 Medicare wages and tips	6 Medicare tax withheld		
		10 Dependent care benefits	11 Nonqualified plans	12a See instructions for box 12 C 19.95		
e Employee's name, address, and ZIP code SHRAVANKUMAR CHIKOTTI 2704B YARMOUTH LANE MOUNT LAUREL NJ 08054		13 Statutory employee <input type="checkbox"/> Retirement plan <input checked="" type="checkbox"/> Third-party sick pay <input type="checkbox"/>	14 Other MED 1691.57 DEN 132.05 VIS 57.38	12b D 3663.73 12c DD 6086.65 12d		
		b Employer identification number (EIN) 13-3131412				
		a Employee's social security number 375-43-8611				
15 State NJ	Employer's state ID number 133131412000	16 State wages, tips, etc. 63321.03	17 State income tax 2596.75	18 Local wages, tips, etc.	19 Local income tax 27.52	20 Locality name FLI

Copy B-To Be Filed With Employee's FEDERAL Tax Return This information is being furnished to the Internal Revenue Service. OMB No. 1545-0008 **Dept. of the Treasury - IRS** Visit the IRS website at www.irs.gov/efile.

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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Copy C-For EMPLOYEE'S RECORDS (See Notice to Employee on the back of Copy B.) OMB No. 1545-0008 **Dept. of the Treasury - IRS** Visit the IRS website at www.irs.gov/efile.

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