Form W-2 Wage and Tax Statemen	nt 2019	7 Social security tips		1 Wages, tips, other comp	pensation 517.98	2 Federal II	11178.56
c Employer's name, address, and ZIP code GE HEALTHCARE IITS USA CO	8 Allocated tips	8 Allocated tips		3 Social security wages 69770.68		4 Social security tax withheld 4325.73	
PO BOX 5000	9	9		5 Medicare wages and tips 69770.68		tax withheld 1011.66	
SCHENECTADY NY 12301	10 Dependent care bene	Dependent care benefits 11 Nonqualified plans		770.00	Ic I	structions for box 12	
e Employee's name, address, and ZIP code	13 Statutory Retirement plan	Third-party sick pay	14 Other		12b		
HARISH GOUD MANDHADI	b Employer identification	number (EIN)	-		12c	5152.70	
400 WALL ST	03-0363612 a Employee's social secu	rity number	1		DD 12d	2957.50	
APT 614	368-45-2707	- ' '		_			
SEATTLE WA 98121 15 State Employer's state ID number	16 State wages, tips, etc.	. 17 State income tax	18 Lo	cal wages, tips, etc.	19 Local in	come tax	20 Locality name
Copy B-To Be Filed With Employee's FE	EDERAL Tax Return	This information is being furn	ished to the Int	ernal Revenue Service. OMB No. 1545-0008		Dept. o	of the Treasury - IRS RS website at www.irs.gov/efi
			This is	nformation is being furnished to the	e Internal Revenu	e Service. If you	are required to file a tax return, a e is taxable and you fail to report it
Form W-2 Wage and Tax Statemen	7 Social security tips	-		1 Wages, tips, other compensation 64617.98		2 Federal income tax withheld 11178.56	
c Employer's name, address, and ZIP code	8 Allocated tips	9 10 Dependent care benefits		3 Social security wages 69770.68 5 Medicare wages and tips 69770.68 11 Nonqualified plans		4 Social security tax withheld 4325.73 6 Medicare tax withheld 1011.66 12a See instructions for box 12	
GE HEALTHCARE IITS USA CO	9						
SCHENECTADY NY 12301	10 Dependent care bene						
e Employee's name, address, and ZIP code	13 Statutory Retirement employee plan					79.80	
HARISH GOUD MANDHADI	X	b Employer identification number (EIN) 03-0363612 a Employee's social security number			12b D 12c	5152.70	
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Form W-2 Wage and Tax Statemen	7 Social security tips	7 Social security tips		1 Wages, tips, other compensation 64617.98		2 Federal income tax withheld 11178.56	
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		10 Dependent care bene					79.80
e Employee's name, address, and ZIP code		13 Statutory Retirement plan	Third-party sick pay	14 Other		12b	5152.70
HARISH GOUD MANDHADI		b Employer identification number (EIN) 03-0363612 a Employee's social security number		-			
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15 State Employer's state ID number	16 State wages, tips, etc.	. 17 State income tax	18 Lo	ocal wages, tips, etc.	19 Local in	come tax	20 Locality name
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Form W-2 Wage and Tax Statemen	7 Social security tips	7 Social security tips		1 Wages, tips, other compensation 64617.98		2 Federal income tax withheld 11178.56	
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PO BOX 5000	9	9 10 Dependent care benefits		5 Medicare wages and tips 69770.68 11 Nonqualified plans		tax withheld	
SCHENECTADY NY 12301	10 Dependent care bene					1011.66	
e Employee's name, address, and ZIP code	13 Statutory Retirement plan			14 Other		79.80	
HARISH GOUD MANDHADI	b Employer identification	number (EIN)	1		12c	5152.70	
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