

Copy B To Be Filed With Employee's Federal Tax Return			2021			OMB No. 1545-0008											
a Employee soc. sec. no. <b>XXX-XX-0029</b>		1 Wages, tips, other comp. <b>385000.00</b>		2 Federal income tax withheld <b>102255.00</b>		a Employee soc. sec. no. <b>XXX-XX-0029</b>		1 Wages, tips, other comp. <b>385000.00</b>		2 Federal income tax withheld <b>102255.00</b>							
b Employer ID no. (EIN) <b>13-3249958</b>		3 Social security wages <b>105300.00</b>		4 Social security tax withheld <b>8853.60</b>		b Employer ID no. (EIN) <b>13-3249958</b>		3 Social security wages <b>105300.00</b>		4 Social security tax withheld <b>8853.60</b>							
		5 Medicare wages and tips <b>400000.00</b>		6 Medicare tax withheld <b>7600.00</b>				5 Medicare wages and tips <b>400000.00</b>		6 Medicare tax withheld <b>7600.00</b>							
c Employer's name, address, and ZIP code <b>INTEGRATED DATA MANAGEMENT SYSTEMS D340299 ACCOUNT ABILITY COMPLIANCE SOFTWARE 555 BROADHOLLOW ROAD SUITE 273 MELVILLE NY 11747-5001</b>																	
d Control number <b>D923442842</b>																	
e Employee's name, address, and ZIP code <b>JOHN M DOE JR 33 EAST 17 STREET STE 201 NEW YORK NY 10003-2005</b>																	
7 Social security tips <b>37500.00</b>			8 Allocated tips <b>32000.00</b>			9			7 Social security tips <b>37500.00</b>			8 Allocated tips <b>32000.00</b>			9		
10 Dependent care benefits <b>9750.00</b>			11 Nonqualified plans			12a Code See instr. for box 12 <b>S 15000.00</b>			10 Dependent care benefits <b>9750.00</b>			11 Nonqualified plans			12a Code <b>S 15000.00</b>		
13 Statutory employee <b>X</b>		14 Other <b>AUTO EXP 4245.34</b>				12b Code <b>FF 52500.00</b>		13 Statutory employee <b>X</b>		14 Other <b>AUTO EXP 4245.34</b>				12b Code <b>FF 52500.00</b>			
Retirement plan <b>X</b>						12c Code <b>DD 9340.00</b>		Retirement plan <b>X</b>						12c Code <b>DD 9340.00</b>			
Third-party sick pay <b>X</b>						12d Code		Third-party sick pay <b>X</b>						12d Code			
NY 13-3249958		<b>325000.00</b>				<b>63500.00</b>		NY 13-3249958		<b>325000.00</b>				<b>63500.00</b>			
NJ 129255681001		<b>60000.25</b>				<b>8750.56</b>		NJ 129255681001		<b>60000.25</b>				<b>8750.56</b>			
15 State Employer's State ID #			16 State wages, tips, etc.			17 State income tax			15 State Employer's State ID #			16 State wages, tips, etc.			17 State income tax		
18 Local wages, tips, etc. <b>325000.00</b>			19 Local income tax <b>19750.00</b>			20 Locality name <b>NYC</b>			18 Local wages, tips, etc. <b>325000.00</b>			19 Local income tax <b>19750.00</b>			20 Locality name <b>NYC</b>		

Form W-2 Wage and Tax Statement Dept. of the Treasury - IRS  
This information is being furnished to the Internal Revenue Service

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