

OMB No. 1545-0008 **Form W-2 Wage and Tax Statement 2021**

a Employee's social security number 056-66-5410	1 Wages, tips, other comp. 48840.80	2 Federal income tax withheld 5121.13	
	3 Social security wages 66340.80	4 Social security tax withheld 4113.12	
b Employer ID number (EIN) 13-2804148	5 Medicare wages and tips 66340.80		6 Medicare tax withheld 961.92
c Employer's name, address, and ZIP code VERATEX INC. 254 FIFTH AVENUE 3RD FLOOR NEW YORK NY 10001			
d Control number			
e Employee's name, address, and ZIP code WEI CHANG 8329 63RD AVE MIDDLE VILLAGE NY 11379			
7 Social security tips	8 Allocated tips	9	
10 Dependent care benefits	11 Nonqualified plans	12a See instructions for box 12 D 17500.00	
12b DD 4650.36	12c	12d	
13 Statutory employee <input type="checkbox"/>	Retirement plan <input checked="" type="checkbox"/>	Third-party sick pay <input type="checkbox"/>	
14 Other SDI 107.28			
NY	48840.80	2231.06	
15 State/Employer's state ID number	16 State wages, tips, etc.	17 State income tax	
18 Local wages, tips, etc. 48840.80	19 Local income tax 1419.66	20 Locality name NY City	

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OMB No. 1545-0008 **Form W-2 Wage and Tax Statement 2021**

a Employee's social security number 148-70-5969	1 Wages, tips, other comp. 23500.40	2 Federal income tax withheld 3247.60
	3 Social security wages 25269.19	4 Social security tax withheld 1566.70
b Employer ID number (EIN) 13-2804148	5 Medicare wages and tips 25269.19	6 Medicare tax withheld 366.45
	c Employer's name, address, and ZIP code VERATEX INC. 254 FIFTH AVENUE 3RD FLOOR NEW YORK NY 10001	
d Control number		
e Employee's name, address, and ZIP code CLAUDIO A. DALESSIO 54 ELSTON STREET BLOOMFIELD NJ 07003		
7 Social security tips	8 Allocated tips	9
10 Dependent care benefits	11 Nonqualified plans	12a See instructions for box 12 D 1768.79
12b DD 1257.76	12c	12d
13 Statutory employee <input type="checkbox"/>	Retirement plan <input checked="" type="checkbox"/>	Third-party sick pay <input type="checkbox"/>
14 Other SDI 87.96		
NY	23500.40	768.08
15 State/Employer's state ID number	16 State wages, tips, etc.	17 State income tax
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a Employee's social security number 080-56-9587	1 Wages, tips, other comp. 2600.00	2 Federal income tax withheld
	3 Social security wages 2600.00	4 Social security tax withheld 161.20
b Employer ID number (EIN) 13-2804148	5 Medicare wages and tips 2600.00	6 Medicare tax withheld 37.70
c Employer's name, address, and ZIP code VERATEX INC. 254 FIFTH AVENUE 3RD FLOOR NEW YORK NY 10001		
d Control number		
e Employee's name, address, and ZIP code THOMAS MAROS 356 W 45TH STREET APT 1D NEW YORK NY 10036		
7 Social security tips	8 Allocated tips	9
10 Dependent care benefits	11 Nonqualified plans	12a See instructions for box 12
12b	12c	12d
13 Statutory employee <input type="checkbox"/>	Retirement plan <input checked="" type="checkbox"/>	Third-party sick pay <input type="checkbox"/>
14 Other SDI	44.25	
NY	2600.00	
15 State/Employer's state ID number	16 State wages, tips, etc.	17 State income tax
18 Local wages, tips, etc. 2600.00	19 Local income tax	20 Locality name NY City

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a Employee's social security number 149-46-3469	1 Wages, tips, other comp. 7539.96	2 Federal income tax withheld	
	3 Social security wages 7539.96	4 Social security tax withheld 467.52	
b Employer ID number (EIN) 13-2804148	5 Medicare wages and tips 7539.96	6 Medicare tax withheld 109.32	
	c Employer's name, address, and ZIP code VERATEX INC. 254 FIFTH AVENUE 3RD FLOOR NEW YORK NY 10001		
d Control number			
e Employee's name, address, and ZIP code CAROLYN J. SIMON 71 TONJES ROAD CALLICOON NY 12723			
7 Social security tips	8 Allocated tips	9	
10 Dependent care benefits	11 Nonqualified plans	12a See instructions for box 12 DD 2784.96	
12b	12c	12d	
13 Statutory employee <input type="checkbox"/>	Retirement plan <input checked="" type="checkbox"/>	Third-party sick pay <input type="checkbox"/>	
14 Other SDI 40.68			
NY	7539.96		
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	

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OMB No. 1545-0008 **Form W-2 Wage and Tax Statement 2021**

a Employee's social security number 106-50-1158	1 Wages, tips, other comp. 50000.04	2 Federal income tax withheld 9283.55
	3 Social security wages 50000.04	4 Social security tax withheld 3099.97
b Employer ID number (EIN) 13-2804148	5 Medicare wages and tips 50000.04	6 Medicare tax withheld 725.04
c Employer's name, address, and ZIP code VERATEX INC. 254 FIFTH AVENUE 3RD FLOOR NEW YORK NY 10001		
d Control number		
e Employee's name, address, and ZIP code CLAUDE A. SIMON 71 TONJES ROAD CALLICOON NY 12723		
7 Social security tips	8 Allocated tips	9
10 Dependent care benefits	11 Nonqualified plans	12a See instructions for box 12 DD 976.62
12b	12c	12d
13 Statutory employee <input type="checkbox"/>	Retirement plan <input checked="" type="checkbox"/>	Third-party sick pay <input type="checkbox"/>
14 Other SDI 31.20		
NY	50000.04	2481.72
15 State/Employer's state ID number	16 State wages, tips, etc.	17 State income tax
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	3 Social security wages 112.05	4 Social security tax withheld 6.95
b Employer ID number (EIN) 13-2804148	5 Medicare wages and tips 112.05	6 Medicare tax withheld 1.62
c Employer's name, address, and ZIP code VERATEX INC. 254 FIFTH AVENUE 3RD FLOOR NEW YORK NY 10001		
d Control number		
e Employee's name, address, and ZIP code AUSTEN VERNON 336 EAST 56TH STREET APT 3 NEW YORK NY 10022		
7 Social security tips	8 Allocated tips	9
10 Dependent care benefits	11 Nonqualified plans	12a See instructions for box 12
12b	12c	12d
13 Statutory employee <input type="checkbox"/>	Retirement plan <input checked="" type="checkbox"/>	Third-party sick pay <input type="checkbox"/>
14 Other SDI	3.48	
NY	112.05	
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

Copy B - To Be Filed With Employee's FEDERAL Tax Return
This information is being furnished to the Internal Revenue Service.
DXA

Dept. of the Treasury - IRS

This information is being furnished to the IRS. If you are required to file a tax return, a negligence penalty/other sanction may be imposed on you if this income is taxable and you fail to report it.

OMB No. 1545-0008 **Form W-2 Wage and Tax Statement 2021**

a Employee's social security number 098-76-4201	1 Wages, tips, other comp. 112.05	2 Federal income tax withheld
	3 Social security wages 112.05	4 Social security tax withheld 6.95
b Employer ID number (EIN) 13-2804148	5 Medicare wages and tips 112.05	6 Medicare tax withheld 1.62
c Employer's name, address, and ZIP code VERATEX INC. 254 FIFTH AVENUE 3RD FLOOR NEW YORK NY 10001		
d Control number		
e Employee's name, address, and ZIP code AUSTEN VERNON 336 EAST 56TH STREET APT 3 NEW YORK NY 10022		
7 Social security tips	8 Allocated tips	9
10 Dependent care benefits	11 Nonqualified plans	12a See instructions for box 12
12b	12c	12d
13 Statutory employee <input type="checkbox"/>	Retirement plan <input checked="" type="checkbox"/>	Third-party sick pay <input type="checkbox"/>
14 Other SDI	3.48	
NY	112.05	
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

Copy C - For EMPLOYEE'S RECORDS (See Notice on back.)
DXA

Dept. of the Treasury - IRS

OMB No. 1545-0008 **Form W-2 Wage and Tax Statement 2021**

a Employee's social security number 098-76-4201	1 Wages, tips, other comp. 112.05	2 Federal income tax withheld
	3 Social security wages 112.05	4 Social security tax withheld 6.95
b Employer ID number (EIN) 13-2804148	5 Medicare wages and tips 112.05	6 Medicare tax withheld 1.62
c Employer's name, address, and ZIP code VERATEX INC. 254 FIFTH AVENUE 3RD FLOOR NEW YORK NY 10001		
d Control number		
e Employee's name, address, and ZIP code AUSTEN VERNON 336 EAST 56TH STREET APT 3 NEW YORK NY 10022		
7 Social security tips	8 Allocated tips	9
10 Dependent care benefits	11 Nonqualified plans	12a See instructions for box 12
12b	12c	12d
13 Statutory employee <input type="checkbox"/>	Retirement plan <input checked="" type="checkbox"/>	Third-party sick pay <input type="checkbox"/>
14 Other SDI	3.48	
NY	112.05	
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

Copy 2 - To be Filed With Employee's State, City, or Local Income Tax Return
DXA

Dept. of the Treasury - IRS

OMB No. 1545-0008 **Form W-2 Wage and Tax Statement 2021**

a Employee's social security number 098-76-4201	1 Wages, tips, other comp. 112.05	2 Federal income tax withheld
	3 Social security wages 112.05	4 Social security tax withheld 6.95
b Employer ID number (EIN) 13-2804148	5 Medicare wages and tips 112.05	6 Medicare tax withheld 1.62
c Employer's name, address, and ZIP code VERATEX INC. 254 FIFTH AVENUE 3RD FLOOR NEW YORK NY 10001		
d Control number		
e Employee's name, address, and ZIP code AUSTEN VERNON 336 EAST 56TH STREET APT 3 NEW YORK NY 10022		
7 Social security tips	8 Allocated tips	9
10 Dependent care benefits	11 Nonqualified plans	12a See instructions for box 12
12b	12c	12d
13 Statutory employee <input type="checkbox"/>	Retirement plan <input checked="" type="checkbox"/>	Third-party sick pay <input type="checkbox"/>
14 Other SDI	3.48	
NY	112.05	
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

Copy 2 - To be Filed With Employee's State, City, or Local Income Tax Return
DXA

Dept. of the Treasury - IRS