

33333	a Control number	For Official Use Only ► OMB No. 1545-0008									
<b>b</b> <b>Kind of Payer</b> (Check one)		941 CT-1	Military Hshd. emp.	943 Medicare govt. emp.	944	<b>Kind of Employer</b> (Check one)		None apply State/local non-501c	501c non-govt. State/local 501c	Federal govt.	Third-party sick pay (Check if applicable)
		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>c</b> Total number of Forms W-2 4		<b>d</b> Establishment number		<b>1</b> Wages, tips, other compensation \$ 143646.09		<b>2</b> Federal income tax withheld \$ 12126.33					
<b>e</b> Employer identification number (EIN) 13-2804148				<b>3</b> Social security wages \$ 187327.63		<b>4</b> Social security tax withheld \$ 11614.50					
<b>f</b> Employer's name VERATEX INC.				<b>5</b> Medicare wages and tips \$ 187327.63		<b>6</b> Medicare tax withheld \$ 2716.26					
				<b>7</b> Social security tips \$		<b>8</b> Allocated tips \$					
				<b>9</b>		<b>10</b> Dependent care benefits \$					
				<b>11</b> Nonqualified plans \$		<b>12a</b> Deferred compensation \$ 43681.54					
<b>h</b> Other EIN used this year				<b>13</b> For third-party sick pay use only		<b>12b</b>					
15 State NY	Employer's state ID number				<b>14</b> Income tax withheld by payer of third-party sick pay \$						
16 State wages, tips, etc. \$ 143646.09	17 State income tax \$ 6014.12				<b>18</b> Local wages, tips, etc. \$ 48840.80		<b>19</b> Local income tax \$ 1419.66				
Employer's contact person					Employer's telephone number		For Official Use only				
Employer's fax number					Employer's email address						

Under penalties of perjury, I declare that I have examined this return and accompanying documents and, to the best of my knowledge and belief, they are true, correct, and complete.

Signature ►

Title ►

Date ►

Form W-3 Transmittal of Wage and Tax Statements 2018

Department of the Treasury  
Internal Revenue Service

**EMPLOYER COPY ONLY**  
**DO NOT FILE THIS COPY WITH THE SSA**

Void <input type="checkbox"/>	a Employee's social security number 056-66-5410	OMB No. 1545-0008					
<b>b</b> Employer identification number (EIN) 13-2804148			1 Wages, tips, other compensation 48840.80		2 Federal income tax withheld 2949.49		
<b>c</b> Employer's name, address, and ZIP code VERATEX INC.  254 FIFTH AVENUE 3RD FLOOR NEW YORK NY 10001			3 Social security wages 66340.80		4 Social security tax withheld 4113.12		
			5 Medicare wages and tips 66340.80		6 Medicare tax withheld 961.92		
			7 Social security tips		8 Allocated tips		
<b>d</b> Control number			9 Verification code		10 Dependent care benefits		
<b>e</b> Employee's first name and initial WEI CHANG  61-54 82ND STREET MIDDLE VILLAGE NY 11379			11 Nonqualified plans		12a See instructions for box 12 C D 17500.00		
			13 Statutory employee plan <input type="checkbox"/> Retirement plan <input checked="" type="checkbox"/> Third-party sick pay <input type="checkbox"/>		12b		
			14 Other SDI 69.24		12c		
					12d		
<b>f</b> Employee's address and ZIP code							
15 State NY	Employer's state ID number 	16 State wages, tips, etc. 48840.80	17 State income tax 2231.06	18 Local wages, tips, etc. 48840.80	19 Local income tax 1419.66	20 Locality name NY City	

**W-2 Wage and Tax Statement**  
Form Copy D - For Employer  
DXA

**2018**

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Void <input type="checkbox"/>	a Employee's social security number 148-70-5969	OMB No. 1545-0008					
<b>b</b> Employer identification number (EIN) 13-2804148			1 Wages, tips, other compensation 42265.33		2 Federal income tax withheld 3658.64		
<b>c</b> Employer's name, address, and ZIP code VERATEX INC.  254 FIFTH AVENUE 3RD FLOOR NEW YORK NY 10001			3 Social security wages 45446.83		4 Social security tax withheld 2817.90		
			5 Medicare wages and tips 45446.83		6 Medicare tax withheld 658.98		
			7 Social security tips		8 Allocated tips		
<b>d</b> Control number			9 Verification code		10 Dependent care benefits		
<b>e</b> Employee's first name and initial CLAUDIO A. DALESSIO  32 DIANNE COURT CLIFTON NJ 07013			11 Nonqualified plans		12a See instructions for box 12 C D 3181.50		
			13 Statutory employee plan <input type="checkbox"/> Retirement plan <input checked="" type="checkbox"/> Third-party sick pay <input type="checkbox"/>		12b		
			14 Other SDI 59.58 HC 3.17		12c		
					12d		
<b>f</b> Employee's address and ZIP code							
15 State NY	Employer's state ID number 	16 State wages, tips, etc. 42265.33	17 State income tax 1643.82	18 Local wages, tips, etc. 	19 Local income tax 	20 Locality name 	

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**2018**

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Void <input type="checkbox"/>	a Employee's social security number 149-46-3469	OMB No. 1545-0008					
<b>b Employer identification number (EIN)</b> 13-2804148			1 Wages, tips, other compensation 7539.96		2 Federal income tax withheld		
<b>c Employer's name, address, and ZIP code</b> VERATEX INC. 254 FIFTH AVENUE 3RD FLOOR NEW YORK NY 10001			3 Social security wages 7539.96		4 Social security tax withheld 467.52		
			5 Medicare wages and tips 7539.96		6 Medicare tax withheld 109.32		
			7 Social security tips		8 Allocated tips		
<b>d Control number</b>			9 Verification code		10 Dependent care benefits		
<b>e Employee's first name and initial</b> CAROLYN J. SIMON 71 TONJES ROAD CALLICOON NY 12723			11 Nonqualified plans		12a See instructions for box 12 C D		
			13 Statutory employee <input type="checkbox"/> Retirement plan <input checked="" type="checkbox"/> Third-party sick pay <input type="checkbox"/>		12b C D		
			14 Other SDI 35.94		12c C D		
					12d C D		
<b>f Employee's address and ZIP code</b>							
15 State NY	Employer's state ID number 1	16 State wages, tips, etc. 7539.96	17 State income tax 1	18 Local wages, tips, etc. 1	19 Local income tax 1	20 Locality name 1	

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Void <input type="checkbox"/>	a Employee's social security number 106-50-1158	OMB No. 1545-0008					
<b>b Employer identification number (EIN)</b> 13-2804148			1 Wages, tips, other compensation 45000.00		2 Federal income tax withheld 5518.20		
<b>c Employer's name, address, and ZIP code</b> VERATEX INC. 254 FIFTH AVENUE 3RD FLOOR NEW YORK NY 10001			3 Social security wages 68000.04		4 Social security tax withheld 4215.96		
			5 Medicare wages and tips 68000.04		6 Medicare tax withheld 986.04		
			7 Social security tips		8 Allocated tips		
<b>d Control number</b>			9 Verification code		10 Dependent care benefits		
<b>e Employee's first name and initial</b> CLAUDE A. SIMON 71 TONJES ROAD CALLICOON NY 12723			11 Nonqualified plans		12a See instructions for box 12 C D 23000.04		
			13 Statutory employee <input type="checkbox"/> Retirement plan <input checked="" type="checkbox"/> Third-party sick pay <input type="checkbox"/>		12b C D		
			14 Other SDI 31.20		12c C D		
					12d C D		
<b>f Employee's address and ZIP code</b>							
15 State NY	Employer's state ID number 1	16 State wages, tips, etc. 45000.00	17 State income tax 2139.24	18 Local wages, tips, etc. 1	19 Local income tax 1	20 Locality name 1	

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