Copy B-To Be Filed Witl Federal Tax Return.	h Employee's		41-0852411 OMB No. 1545-0008		
a Employee's soc. sec. no.	1 Wages, tips, other co	mp.	2 Federal income tax withheld		
XXX-XX-7222	87900.00		12316.90		
	3 Social security wages		4 Social security tax withheld		
b Employer ID number (EIN)			5449.80		
40.400000	5 Medicare wages and tips		6 Medicare tax withheld		
<u>46-1229393</u>	<u>l 87900</u>	0.00	1274.55		
c Employer's name, address, a	and ZIP code				
KANAP SYSTEMS 4949 PLEASANT S					
WEST DES MOINE	S	IA	50266		
d Control number					
e Employee's name, address,	and ZIP code		Suff		
ANIL K. 2511 N 109TH PLZ OMAHA	GRANDHI APT 303	NE	68164		
7 Social security tips	8 Allocated tips		9 Verification code		
10 Dependent care benefits	11 Nonqualified plans		12a Code		
13 Statutory employee 14 Oth	er		12b Code		
Retirement plan			12c Code		
			<b></b>		
Third-party sick pay			12d Code		
	879	00.00	12d Code 5209.00		
MN 5289030	1				
Third-party sick pay  MN   5289030  15 State Employer's state ID nu 18 Local wages, tips, etc.	1		5209.00		

Form W-2 Wage and Tax Statement 2021 Dept. of the Treasury -- IRS This information is being furnished to the Internal Revenue Service.

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Copy C-For EMPLOYEE Notice to Employee on	'S RE	CORDS (See ack of Copy B.)		41-0852411 OMB No. 1545-0008
a Employee's soc. sec. no.		ages, tips, other comp.	2	Federal income tax withheld
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b Employer ID number (EIN)	$-1^{3}$ Sc	cial security wages 87900.00	4	Social security tax withheld 5449.80
b Employer ID number (EIN)	5 Me	edicare wages and tips	6	Medicare tax withheld
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c Employer's name, address,	and ZI	P code		
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d Control number				
e Employee's name, address,	and Z	P code		Suff.
ANIL K. 2511 N 109TH PLZ				00404
ОМАНА		NE		68164
7 Social security tips	8 Al	located tips	9	Verification code
10 Dependent care benefits	11 N	onqualified plans	1:	2a Code
13 Statutory employee 14 Otl	ner		12	2b Code
Retirement plan			1:	2c Code
Third-party sick pay			12	2d Code
MN 5289030		87900.00		5209.00
15 State Employer's state ID n	umber	16 State wages, tips, etc.	_	17 State income tax
18 Local wages, tips, etc.	19 L	ocal income tax	20	) Locality name

Copy 2-To Be File City, or Local Inco	d With	Em <sub>l</sub> x Re	ployee's State eturn.	·,	41-0852411 OMB No. 1545-0008
a Employee's soc. sec			ages, tips, other c 8790	omp.	2 Federal income tax withheld 12316.90
XXX-XX-7222		3 Sc	ocial security wage		4 Social security tax withheld
b Employer ID number	r (EIN)		8790		5449.80
10.1000000		5 Me	edicare wages and		6 Medicare tax withheld
46-1229393 c Employer's name, ac			8790	0.00	1274.55
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WEST DES M	OINE	S		IA	50266
d Control number	60				
e Employee's name, a	ddress, a	nd Z	IP code		Suff
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	H PLZ		· · · · · · · · · · · · · · · · · · ·	NE	68164
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2511 N 109Th OMAHA 7 Social security tips 10 Dependent care ber 13 Statutory employee	nefits	8 AII	T 303	NE	9 Verification code  12a Code  12b Code
2511 N 109Th OMAHA 7 Social security tips 10 Dependent care ber 13 Statutory employee Retirement plan	nefits	8 AII	T 303	NE	9 Verification code  12a Code  12b Code  12c Code
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Copy 2-To Be Filed With Employee's State, City, or Local Income Tax Return. 41-0852411 OMB No. 1545-0008 2 Federal income tax withheld 12316.90 a Employee's soc. sec. no. 1 Wages, tips, other comp. 87900.00 XXX-XX-7222 3 Social security wages 4 Social security tax withheld 5449.80 b Employer ID number (EIN) 87900.00 5 Medicare wages and tips 6 Medicare tax withheld 46-1229393 87900.00 1274.55 c Employer's name, address, and ZIP code KANAP SYSTEMS LLC 4949 PLEASANT ST, SUITE 200 WEST DES MOINES IΑ 50266 d Control number 60 e Employee's name, address, and ZIP code Suff. ANIL K. **GRANDHI** 2511 N 109TH PLZ APT 303 NE **OMAHA** 68164 7 Social security tips 8 Allocated tips 9 Verification code 11 Nonqualified plans 10 Dependent care benefits 12a Code 13 Statutory employee 14 Other 12b Code Retirement plan 12c Code Third-party sick pay 12d Code MN 5289030 87900.00 5209.00 15 State Employer's state ID number 16 State wages, tips, etc. 17 State income tax 20 Locality name 18 Local wages, tips, etc. 19 Local income tax

Form W-2 Wage and Tax Statement

2021

Dept. of the Treasury -- IRS

DAA

## **Notice to Employee**

Do you have to file? Refer to the Instructions for Forms 1040 and 1040-SR to determine if you are required to file a tax return. Even if you don't have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income credit (EIC). You may be able to take the EIC for 2021 if your adjusted gross income (AGI) is less than a certain amount. The amount of the credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2021 or if income is earned for services provided while you were an inmate at a penal institution. For 2021 income limits and more information, visit www.irs.gov/EITC. See also Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Employee's social security number (SSN). For your protection, this form may show only the last four digits of your SSN. However, your employer has reported your complete SSN to the IRS and SSA.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website at www.SSA.gov.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in box 12, using code DD, of the cost of employer-sponsored health coverage is for your information only. The amount reported with

Credit for excess taxes. If you had more than one employer in 2021 and more than \$8,853.60 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than \$5,203.80 in Tier 2 RRTA tax was withheld, you may also be able to claim a credit. See the Instructions for Forms 1040 and 1040-SR and Pub. 505, Tax Withholding and Estimated Tax

(See also Instructions for Employee on the back of Copy C.)

## **Instructions for Employee**

(See also Notice to Employee on the back of Copy B.)
Box 1. Enter this amount on the wages line of your tax return.
Box 2. Enter this amount on the federal income tax withheld line of your

tax return.

Box 5. You may be required to report this amount on Form 8959,
Additional Medicare Tax. See the Instructions for Forms 1040 and
1040-SR to determine if you are required to complete Form 8959.
Box 6. This amount includes the 1.45% Medicare Tax withheld on all
Medicare wages and tips shown in box 5, as well as the 0.9%
Additional Medicare Tax on any of those Medicare wages and tips
shows 5201.00 and

above \$200,000.

Box 8. This amount is not included in box 1, 3, 5, or 7. For information

Box 8. This amount is not included in box 1, 3, 5, or 7. For information on how to report tips on your tax return, see the instructions for Forms 1040 and 1040-SR. You must file Form 4137. Social Security and Medicare Tax on Unreported Tip income, with your income tax return to report at least the allocated to ja amount onlines you can prove with adequate records that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax owed on tips you dinn't report to your employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security figs will be credited to your social security record (used to figure your benefits). Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over \$5,000 is also included in box 1. Complete Form 2441, Child and Dependents.

is also included in box 1. Complete Form 2441. Child and Dependent. Care Expenses, to figure any taxable and nontaxable amounts. Box 11. This amount is (a) reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or (b) included in box 3 and/or box 5 if it is a prior year deferral under a nonqualified of section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year, If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, if you made a deferral and Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. Your made this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, B), and EE) under all plans are generally inflient to a total of \$19,500

BB, and EE) under all plans are generally limited to a total of \$19,500 (\$13,500 if you only have SIMPLE plans, \$22,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571. Deferrals under code G are limited to \$19,500. Deferrals under code rare limited to \$7,000.

are limited to \$7,000. However, if you were at least age 50 in 2021, your employer may have allowed an additional deferral of up to \$6,500 (\$3,000 for section 401(k)(11) and 408(p) SIMPLE plans). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G, the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the Instructions for Forms 1040 and 1040-SR.

SR.

Note: If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year. A-Uncollected social security or RrTA tax on tips. Include this tax on Form 1040 or 1040-SR. See the Instructions for Forms 1040 and 1040-SR.

B-Uncollected Medicare tax on tips. Include this tax on Form 1040 or 1040-SR. See the Instructions for Forms 1040 and 1040-SR.

C-Taxable cost of group-term life insurance over \$50,000 (included in boxes 1, 3 (up to the social security wage base), and 5)

Delictive deferrals to a section 401(s) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(s) arrangement and the section 401(s) arrangement and the section 401(s) arrangement and the section 401(s) salary reduction agreement Elective deferrals under a section 401(s) salary reduction of SEP

Elective deferrals and employer contributions (including nonelective

F-Elective deferrals under a section 400(k)(b) salary feeduction SEP-G-Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan H-Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Instructions for Forms 1040 and 1040-SR for how to deduct. J-Nontraxable sick pay (information only, not included in box 1, 3, or 5) K-20% excise tax on excess golden parachute payments. See the Instructions for Forms 1040 and 1040-SR.

ror Forms 1040 and 1040-SR.
L-Substantiated employee business expense reimbursements (nontaxable)
M-Uncollected social security or RRTA tax on taxable cost of groupterm life
insurance over \$50,000 (former employees only). See the Instructions for
Forms 1040 and 1040-SR.

Forms 1040 and 1040-SR.

N-Uncollected Medicare tax on taxable cost of group-term life insurance over \$50,000 (former employees only). See "Other Taxes" in the Form 1040 instructions.

P-Excludable moving expense reimbursements paid directly to a member of the

P-Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in box 1, 3, or 5). Q-Nontaxable combat pay. See the Instructions for Forms 1040 and 1040-SR for details on reporting this amount. R-Employer contributions to your Archer MSA. Report on Form 8853, Archer MSAs and Long-Term Care Insurance Contracts. S-Employee salary reduction contributions under a section 408(p) SIMPLE plan (not included in box 1). T-Adoption benefits (not included in box 1). Complete Form 8839, Qualified Moderle Expenses to figure and trackly learned to the contraction of the contr

T-Adoption benefits (not included in box 1). Complete Form 8839, Qualified Adoption Expenses, to figure any taxable and nontaxable amounts. V-Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to the social security wage base), and 5). See Pub. 252, Taxable and Nontaxable Income, for reporting requirements.

W-Emplyeer contributions (including amounts the employee elected to contribute using a section 7.25 (caleteria) plan) to your health savings account. V-olderals under a section 4049, and nonqualified deferred compensation plan Z-Income under a nonqualified deferred compensation plan that fails to satisfy section 4049. This amount is also included in box 1, it is subject to a dditional 20% tax plus interest. See the Instructions for Forms 1040 and 1040 SR.

SR.

AR-Designated Roth contributions under a section 401(k) plan
BB-Designated Roth contributions under a section 403(b) plan
DD-Cost of employer-sponsored health coverage. The amount reported with
code DD is not taxable.

EC-Designated Roth contributions under a governmental section 457(b) plan.
This amount does not apply to contributions under a taxexempt organization
section 457(b) plan.

FF-Permitted benefits under a qualified small employer health reimbursement

FF-Permitted benefits under a qualified small employer treasurements arrangement.
GG-income from qualified equity grants under section 83(i)
HH-Aggregate deferrals under section 83(i) elections as of the close of the calendar year
HH-Aggregate deferrals under section 83(i) elections as of the close of the calendar year
Sox 13. If the 'Retirement plan' box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to individual Retirement (RRAs).
Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontroblem fromers, educational assistance insurance premiums deducted, nontroblem fromers, educational assistance and the second section of the sect

include ups reported by the employee to the employer in familiate interment. (RRTA) compensation. Note: Keep Copy C of Form W-2 for at least 3 years after the due date for filling your income tax return. However, to help protect your social security benefits, keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular your.