

<b>b Employer's Identification number</b>		26-0020648		<b>12a See instructions for Box 12</b>	<b>1 Wages, tips, other compensation</b>	<b>2 Federal income tax withheld</b>	
<b>c Employer's name, address, and ZIP code</b>		BLUESTONE LLC 1 OAKDENE DR STE 200 BARRINGTON IL 60010-4036		\$	39145.37	2891.00	
<b>e Employee's first name and initial</b>		<b>Last name</b>		<b>12b</b>	<b>3 Social security wages</b>	<b>4 Social security tax withheld</b>	
SRIKANTH PEDAVALLI		417002997		\$			
5303 VASSAR DR GREER SC 29650				<b>12c</b>	<b>5 Medicare wages and tips</b>	<b>6 Medicare tax withheld</b>	
<b>f Employee's address and ZIP code</b>				\$			
<b>15 State</b>	<b>Employer's state I.D. No.</b>	<b>16 State wages, tips, etc.</b>	<b>17 State income tax</b>	<b>12d</b>	<b>7 Social security tips</b>	<b>8 Allocated tips</b>	
SC	103104640	39145.37	2526.61	\$			
Form W-2 Wage and Tax Statement 2021 Department of the Treasury-Internal Revenue Service				OMB # 1545-0008		Copy B To Be Filed With Employee's FEDERAL Tax Return	

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Form W-2 Wage and Tax Statement 2021 Department of the Treasury-Internal Revenue Service				OMB # 1545-0008		Copy 2 To Be Filed With Employee's STATE, CITY, or LOCAL Tax Departments	

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