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Form W-2 Wage and Tax Statemen	t 2021		7 Social security tips	1 Wages, tips, other cor	_{np.} 2427.00	2 Federal incom	11882.60	
c Employer's name, address, and ZIP code MUTUAL OF OMAHA INSURANCE CO. 3301 DODGE STREET OMAHA NE 68131			8 Allocated tips	8	3 Social security wages 87775.60			
			9		5 Medicare wages and tips 87775.60		6 Medicare tax withheld 1272.75	
			10 Dependent care benefits	11 Nonqualified plans	11 Nonqualified plans		12a See instructions for box 12 C 21.60	
e Employee's name, address, and ZIP code			13 Statutory Retirement Third-part sick pay	ty 14 Other	14 Other			
MOUNIKA YERRAMSETTY 7338 S 184TH STREET			b Employer identification number ((EIN)		12c	5348.60	
OMAHA NE 68136			47-0246511 a Employee's social security no.				DD 14868.00	
			XXX-XX-9007	_				
15 State	16 State wages, tips, etc. 824	27.00	I I	Local wages, tips, etc.	19 Local inc	ome 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. OMB No. 1545-0008	1		the Treasury - IRS ite at www.irs.gov/efile	
					ad to the Internal Re			
			7 Social security tips		This information is being fumished to the Internal Renegligence penalty or other sanction may be imposed. 1 Wages, tips, other comp.		s taxable and you fail to report it	
Form W-2 Wage and Tax Statement 2021 c Employer's name, address, and ZIP code MUTUAL OF OMAHA INSURANCE CO. 3301 DODGE STREET OMAHA NE 68131			8 Allocated tips		82427.00 3 Social security wages 87775.60 5 Medicare wages and tips 87775.60		11882.60	
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e Employee's name, address, and ZIP code MOUNIKA YERRAMSETTY 7338 S 184TH STREET OMAHA NE 68136			13 Statutory Retirement Third-part sick pay	14 Other			5348.60	
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Copy 2 To Be Filed With Employee's State, City	or Local Income Tax	x Returr	L87	OMB No. 1545-0008	5206	Dept. of	the Treasury - IRS	