a Employee's social 107-73-458		OMB No. 154	5-000	Safe, accurate, 8 FAST! Use	IRSE -	-fil	Visit the www.ir	e IRS website at s.gov/efile
b Employer identification number (EIN)			1	Wages, tips, other cor	npensation	<b>2</b> Fe	ederal income t	ax withheld
46-3088848				77	877.54			6538.45
c Employer's name, address, and ZIP code			3	Social security wage	es	4 Sc	ocial security ta	x withheld
VITS CONSULTING CORP				13	760.51			853.15
			5	Medicare wages and	d tips	6 M	edicare tax wit	hheld
3350 ANNAPOLIS LANE N, SUI	TE A			13	760.51			199.53
			7	Social security tips		<b>8</b> Al	located tips	
MINNEAPOLIS MN 55447								
d Control number			9			10 D	ependent care	benefits
e Employee's first name and initial Last name		Suff.	11	Nonqualified plans		<b>12a</b> S	ee instructions	for box 12
SHILPA P LAKRA						o d e		
9450 FAIRFAX BLVD			13	Statutory Retirement employee plan	Third-party sick pay	<b>12b</b>	I	
						o d e		
FAIRFAX VA 22031			14	Other		12c		
						o d e		
						12d		
						o d e		
f Employee's address and ZIP code								
15 State Employer's state ID number 16 State	e wages, tips, etc.	17 State incom	ne tax	18 Local wage	s, tips, etc. 1	9 Loca	l income tax	20 Locality name
VA 30-463088848F-001	77877.54	393	1.3	31				
Form <b>W-2</b> Wage and Tax Statement	nt	202	]	D	epartment of	the Trea	asury-Internal	Revenue Service

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

## 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.** 

**Employees 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 code DD is not taxable.

**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.)

	a Employee 107-73	's social security number -4585	OMB No. 154	5-000	This are 8 may	s information required to fi / be imposed	is being furnis le a tax return on you if this	hed to , a neg incom	the Inte ligence le is taxa	ernal Reven penalty or o able and yo	ue Service. If you other sanction u fail to report it.
b Employer identification number (	EIN)			1	Wages,	tips, other co	mpensation	2	Feder	al income t	ax withheld
46-3088848						77	877.54	1			6538.45
c Employer's name, address, and a	ZIP code			3	Social	security wag	les	4	Socia	security ta	ax withheld
VITS CONSULTING	CORP					13	760.51	L			853.15
				5	Medica	ire wages an	nd tips	6	Medic	are tax wit	hheld
3350 ANNAPOLIS L	ANE N,	SUITE A				13	760.51	L			199.53
				7	Social	security tips		8	Alloca	ted tips	
MINNEAPOLIS MN 5	5447										
d Control number				9				10	Deper	ndent care	benefits
e Employee's first name and initial	Last na	ame	Suff.	11	Nonqu	alified plans		12	a See i	nstructions	for box 12
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f Employee's address and ZIP cod	е										
15 State Employer's state ID number	er	16 State wages, tips, etc.	17 State incon	ne tax	18	Local wage	es, tips, etc.	<b>19</b> Lo	ocal inc	ome tax	20 Locality name
VA 30-463088848	F-001	77877.54	393	1.3	31						
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Form **W-2** Wage and Tax Statement

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epartment of the Treasury-Int

Safe, accurate, FAST! Use

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Copy C-For EMPLOYEE'S RECORDS

(See Notice to Employee on the back of Copy B.)

## 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 above \$200,000.

**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 tip amount unless 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 didn't report to your employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security tips 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 Dependent Care Expenses, to compute 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 5 if it is a prior year deferral under a nonqualified or 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, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

**Box 12.** The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, 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 H 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.

**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 social security wage base), and 5)

**D**-Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.

E-Elective deferrals under a section 403(b) salary reduction agreement (continued on back of Copy 2)

a Employee's social security number 107-73-4585       OMB No. 1545-0008         b Employer identification number (EIN) 46-3088848       1 Wages, tips, other compensation 77877.54       2 Federal income tax withh 65385         c Employer's name, address, and ZIP code       3 Social security wages       4 Social security wages         VITS CONSULTING CORP       3 Social security wages       4 Social security wathhed 13760.51       853         3350 ANNAPOLIS LANE N, SUITE A       5 Medicare wages and tips       6 Medicare tax withheld 13760.51       199         MINNEAPOLIS MN 55447       7 Social security tips       8 Allocated tips         e Employee's first name and initial SHILPA P LAKRA       Last name       Suff.       11 Nonqualified plans       12a         9       13 Statutory employee       Betweenent plan       12b       12b       12b       12b         14 Other       14 Other       12d       12b       12b       12d       <
b Employer identification number (EIN)       1 Wages, tips, other compensation       2 Federal income tax withh         46-3088848       77877.54       6538         c Employer's name, address, and ZIP code       3 Social security wages       4 Social security tax withhe         VITS CONSULTING CORP       3 Social security wages       4 Social security tax withhe         3350 ANNAPOLIS LANE N, SUITE A       5 Medicare wages and tips       6 Medicare tax withheld         MINNEAPOLIS MN 55447       13760.51       199         d Control number       9       10 Dependent care benefits         e Employee's first name and initial       Last name       Suff.       11 Nonqualified plans       12a         SHILPA P LAKRA       9450 FAIRFAX BLVD       13 Statutory employee       Peterement plan       Third-party plan       2b       2b         FAIRFAX VA 22031       14 Other       12d       12d       12d       12d
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MINNEAPOLIS MN 55447       7 Social security tips       8 Allocated tips         d Control number       9       10 Dependent care benefits         e Employee's first name and initial Last name       Suff.       11 Nonqualified plans       12a         SHILPA P LAKRA       9450 FAIRFAX BLVD       13 Statutory       Retirement Third-party employee       12b         FAIRFAX VA 22031       14 Other       12c       12c       12c         12d       12d       12d       12d       12d         9       14 Other       12d       12d       12d
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d Control number     9     10 Dependent care benefits       e Employee's first name and initial SHILPA P LAKRA     Last name     Suff.     11 Nonqualified plans     12a
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VA 30-463088848F-001 77877.54 3931.31
Form W-2 Wage and Tax Statement 2021 Department of the Treasury-Internal Revenue

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

## **Instructions for Employee** (continued from back of Copy C)

Box 12 (continued)

F-Elective deferrals under a section 408(k)(6) salary reduction SEP

 ${\bf G-}$  Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan

 $\rm H-Elective$  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**-Nontaxable 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.

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.

N—Uncollected Medicare tax on taxable cost of group-term life insurance over \$50,000 (former employees only). See the Instructions for Forms 1040 and 1040-SR.

**P**—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in box 1, 3, or 5)

 ${\bf Q-}$  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 Adoption Expenses, to compute any taxable and nontaxable amounts.

**V**–Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements.

**W**—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889, Health Savings Accounts (HSAs).

Y-Deferrals under a section 409A nonqualified deferred compensation plan

**Z**–Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Instructions for Forms 1040 and 1040-SR.

AA—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.

**EE**—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.

**FF**—Permitted benefits under a qualified small employer health reimbursement 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

**Box 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 Arrangements (IRAs).

**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, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.

**Note:** Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing 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 year.