

Form W-2  
 2021  
 MD 10384736  
 12923.06  
 15 State Employer's state ID, no.

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

17 State income tax  
 18 Local wages, tps, etc.

19 Local income tax  
 20 Locally name

16 State Employer's state ID, no. 12923.06

15 State Employer's state ID, no. MD 10384736

OMB No. 1545-0008  
 d Control Number 4100600  
 1 Wages, tps, other compensation 12923.06  
 2 Federal income tax withheld

b Employer identification number (EIN) 76-0689539  
 3 Social security wages 12923.06  
 4 Social security tax withheld 801.23

a Employee's social security number XXX-XX-5240  
 5 Medicare wages and tps 12923.06  
 6 Medicare tax withheld 187.40

c Employer's name, address and ZIP code  
 INSPIRITY PEO SERVICES, L.P.  
 RXSENSE HOLDINGS LLC  
 1901 CRESCENT SPRINGS DR  
 KINGWOOD TX 77339-3802

e Employee's name, address and ZIP code  
 VISHNUPRIYA LODARI  
 22434 BRIGHT SKY DR  
 CLARKSBURG MD 20871-6359

7 Social security tps  
 8 Allocated tps  
 9

10 Dependent care benefits  
 11 Nonqualified plans  
 12a Code 12b Code

13 Statutory employee  
 14 Other  
 Retirement plan  
 Third-party sick pay

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