Copy 2 — To Be Filed With Employee's State, City, or Local Income Tax Return				Form W-2 and Tax Statement OMB No. 1545-000		
	2021	1 Wages, tips, other		2 Federal income to	ax withheld 1276.40	
a	Employee's SSN 128-43-7689	3 Social security wa	Social security wages 12720.00		4 Social security tax withheld 788.64	
b	Employer ID No. (EIN) 06-0383750	5 Medicare wages a	Medicare wages and tips 12720.00		6 Medicare tax withheld 184.44	
С	Employer's name, address and HARTFORD FIRE INS. ONE HARTFORD PLAZ HARTFORD, CT 06155	CO ZA				
d	Control number					
	- f Employee's name, addres SAITEJA MALISETTY 7517 PIERCE PLZ APT OMAHA, NE 68124	6				
7	Social security tips	8 Allocated tips	Allocated tips		9	
10 Dependent care benefits 1		11 Nonqualified plan	Nonqualified plans		for box 12	
13 Statutory employee Retirement plan Third-party sick pay				12b code		
14 Other				12c code 12d code		
15 State Employer's state ID no. 350621		16 State wages	16 State wages, tips, etc. 12720.00		17 State income tax 635.77	
18	Local wages, tips, etc.	19 Local income	tax	20 Locality name		