

a Employee's SSN 812-13-8042		b Employer identification number (EIN) 20-0324158			OMB No. 1545-0008	
c Employer's name, address, and ZIP code EMINENCE IT SOLUTIONS, INC EMINENCE IT SOLUTIONS, INC. 1135 KILDAIRE FARM RD SUITE 250-4 CARY NC 27511		1 Wgs, tips, other compn 28050.00	2 Fed inc tax withheld 2376.00	3 Social security wages		
		4 SS tax withheld	5 Medicare wages & tips	6 Medicare tax withheld		
		7 Social security tips	8 Allocated tips	9		
d Control number		10 Depdnt care benefits	11 Nonqualified plans	12a		
e Employee's name, address, and ZIP code NEHA DUSA 1727 SE 30TH PL RENTON WA 98055		13 Statutory employee <input type="checkbox"/> Retirement plan <input type="checkbox"/> Third-party sick pay <input type="checkbox"/>	14 Other	12b		
				12c		
				12d		
15 State NC	Employer's state ID number 600479587	16 State wages, tips, etc 28050.00	17 State income tax 1008.00	18 Local wages, tips, etc	19 Local income tax	20 Locality name

Form **W-2**
Wage and Tax Statement
2021

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

REV 12/17/21 QBDT

Department of the Treasury — IRS

a Employee's SSN 812-13-8042		b Employer identification number (EIN) 20-0324158			OMB No. 1545-0008	
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Form **W-2**
Wage and Tax Statement
2021

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

REV 12/17/21 QBDT

a Employee's SSN 812-13-8042		b Employer identification number (EIN) 20-0324158			OMB No. 1545-0008	
c Employer's name, address, and ZIP code EMINENCE IT SOLUTIONS, INC EMINENCE IT SOLUTIONS, INC. 1135 KILDAIRE FARM RD SUITE 250-4 CARY NC 27511		This information is being furnished to the IRS. If you are required to file a tax return, a negligence penalty or other sanction may be imposed on you if this income is taxable and you fail to report it.				
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Form **W-2**
Wage and Tax Statement
2021

Copy C For EMPLOYEE'S RECORDS.
(See Notice to Employee.)

REV 12/17/21 QBDT