Dept. of the Treasury - Internal Revenue Service

Copy C For EMPLOYEE'S RECORDS (See notice on back of copy 2)

This information is being furnished to the Internal Revenue Service. 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.

These substitute W-2 Wages and Tax Statements are acceptable for filing with your Federal, State and Local Income Tax Returns. If you worked in multiple locations, or had several forms of special compensation, you may receive more than one of these documents.

All copies of your W-2 are on this page, separated by perforations. The white copies are for your tax returns; the blue copy is for your records. General instructions for these forms, including an explanation of the letter codes used in box 12 are on the other side of the page.										
REISSUED STATEMENT	1			1 WAGES	, TIPS, OTHER COMPENSATION		2 FEDERAL INCOM	IE TAY WITHHELD		
This information is being furnished to the Internal Revenue Service		21 OMB NO. 1545-0008 YEE'S SOCIAL SECURITY NUMBER		54123.18			11657.25			
B. EMPLOYER IDENTIFICATION NUMBER 43-2054614	A. EMPLOYEE'S 184-4			3 SOCIAL SECURITY WAGES 59423.54			4 SOCIAL SECURITY TAX WITHHELD 3684.26			
C. EMPLOYER'S NAME.ADDRESS AND ZIP CODE FIS MANAGEMENT SERVICES LLC 1.0TH FLOOR				5 MEDICARE WAGES AND TIPS 59423.54			6 MEDICARE TAX WITHHELD 861.64			
10TH FLOOR 601 RIVERSIDE AVE 13 Statutory Retirement Third-Party			7 SOCIAL SECURITY TIPS			8 ALLOCATED TIPS				
JACKSONVILLE, FL 32204	Employee	Plan	Sick Pay	9			10 DEPENDANT CA	RE BENEFITS		
E. EMPLOYEE'S FIRST NAME AND INITIAL LAST NAME NAGA DEVI PRIYA NEELA			SUFF.	11 NONQU	ALIFIED PLANS	220700000000	^{12 a-d} D	5300.36		
9414 OWINGS HEIGHTS CIRCLE			14 OTHER			W	600.00			
APT 301 OWINGS MILLS, MD 21117						С	43.05			
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MD 11971911	54123	.18	425	7.77						
Copy 2 To be filed with Employee's STATE, CIT FORM W-2 Wage and Tax Stateme	Y or LOCAL tax	return	2.0	Copy 2 To be filed with Employee's STATE, CITY or LOCAL tax return Dept. of the Treasury - Internal Revenue Servi						
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Copy B To be filed with Employee's FEDERAL tax return

FORM W-2 Wage and Tax Statement

OWINGS MILLS, MD 21117

F. EMPLOYEE'S ADDRESS AND ZIPCODE
15 STATE | EMPLOYER'S STATE I.D. NO.
11971911

2021

17 STATE INCOME TAX 4257.77

54123.18

Dept. of the Treasury - Internal Revenue Service

18 LOCAL WAGES, TIPS, ETC.

Retirement X Third-Party Sick pay

FIS MANAGEMENT SERVICES LLC

10TH FLOOR 601 RIVERSIDE AVE JACKSONVILLE, FL 32204

PRESORTED 1st CLASS U.S POSTAGE PAID Ceridian Corporation

IMPORTANT TAX DOCUMENT ENCLOSED I CERIDIAN CERIDIAN CERIDIAN CERIDIAN CERIDIAN CERIDIA DIAN CERIDIAN CERIDIAN CERIDIAN CERIDIAN CERIDIAN CEI

NAGA DEVI PRIYA NEELA 9414 OWINGS HEIGHTS CIRCLE APT 301 OWINGS MILLS, MD 21117

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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.

Employee's 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 employern trecord. 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.

COVID related leave wages. In Box 14 are amounts paid as qualified sick or family leave wages under

COVID related leave wages. In Box 14 are amounts paid as qualified sick or family leave wages under Covid laws. Specifically, up to 6 types of paid qualified sick or family leave wages are reported: For leave taken between 1/1/21 & 3/31/21: Sick leave wages subject to the \$511/day limit because of care you required; Sick leave wages subject to the \$500/day limit because of care you provided to another; and Emergency family leave wages. For leave taken between 4/1/21 & 9/30/21: Sick leave wages subject to the \$511/day limit because of care you required; Sick leave wages subject to the \$200/day limit because of care you provided to another; and Emergency family leave wages.

Instructions for Employee

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

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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.

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Box 6. This amount includes the 1.45% Medicare Tax withheld on all Medicare Wagse and lips shown in box 5, as well as the 0.95% Additional Medicare Tax on any of those Medicare wagse and tips above \$200,000.

Box 8. This amount is not included in box 1, 3, 5, or 7. For information to no hour of the property of the seed of

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 firmled 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. 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 the social security wage base), and 5)

D-Elective deferrals under a section 403(k)(6) salary reduction agreement esceton 401(k) arrangement.

E-Elective deferrals under a section 403(k)(6) salary reduction SEP G-Elective deferrals and employer contributions (including nonelective deferrals and employer contributions (including nonelective deferrals to a section \$50(10)(118)(10) 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 for how to deduct.

J-Nontaxable sick pay (information only, not in

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 figure any taxable and nontaxable amounts.
V–Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to the 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 accounts. Report on Form 8889, Health Savings Accounts (HSAs).
Y–Deferrals under a section 409A nonqualified deferred compensation plan that fails to salisfy 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 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 or of the clergy sparsonage allowance and utilities.
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