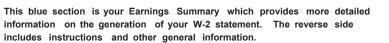
ference Copy							
$M_2$ Wage and Tax $2021$							
nent <b>ZUZ</b>							
OMB No. 1545-0008							
Corp. Employer use only							
and ZIP code							
PELICAN IT GROUP LLC 36335 CYPRESS GLEN AVENUE							
PRAIRIEVILLE, LA 70769							
Batch #90879							
and ZIP code							
POTLURI							
DR							
a Employee's SSA number							
2 Federal income tax withheld							
871.68							
4 Social security tax withheld							
6 Medicare tax withheld							
8 Allocated tips							
10 Dependent care benefits							
lo Dependent dure Senents							
12a See instructions for box 12							
12b							
12c							
12d 13 Stat emp Ret. plan 3rd party sick p							
b. 16 State wages, tips, etc. 12000.00							
18 Local wages, tips, etc.							
20 Locality name							

## 2021 W-2 and EARNINGS SUMMARY

14279



1. Your Gross Pay was adjusted as follows to produce your W-2 Statement.

	Wages, Tips, other Compensation Box 1 of W-2	Social Security Wages Box 3 of W-2	Medicare Wages Box 5 of W-2	GA. State Wages, Tips, Etc. Box 16 of W-2	
Gross Pay Reported W-2 Wages	12,000.00 <b>12,000.00</b>	12,000.00 <b>0.00</b>	12,000.00 <b>0.00</b>	12,000.00 <b>12,000.00</b>	

2. Employee Name and Address.

## MANOGJNA SINDHU POTLURI 3110 THE COMMONS DR CUMMING, GA 33041

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1 Wages, tips, other comp. 12000.00	2 Federal income tax withheld 871.68	1 Wages, tips, other comp. 12000.00	2 Federal income tax withheld 871.68	1 Wages, tips, other comp. 12000.00	2 Federal income tax withheld 871.68
3 Social security wages	4 Social security tax withheld	3 Social security wages	4 Social security tax withheld	3 Social security wages	4 Social security tax withheld
5 Medicare wages and tips	6 Medicare tax withheld	5 Medicare wages and tips	6 Medicare tax withheld	5 Medicare wages and tips	6 Medicare tax withheld
d Control number Dept. 000146 RA/NXX	Corp. Employer use only A 10	d Control number Dept. 000146 RA/NXX	Corp. Employer use only A 10	d Control number Dept. 000146 RA/NXX	Corp. Employer use only A 10
000146 RA/NXX c Employer's name. address. a		,		000146 RA/NXX c Employer's name, address, a	
1.1.2.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1					
	GLEN AVENUE LA 70769	E PELICAN IT GROUP LLC PELICAN IT GROUP LLC E 36335 CYPRESS GLEN AVENUE 36335 CYPRESS GLEN AVENUE PRAIRIEVILLE, LA 70769 PRAIRIEVILLE, LA 70769			
b Employer's FED ID number	a Employee's SSA number	b Employer's FED ID number	a Employee's SSA number	b Employer's FED ID number	a Employee's SSA number
20-8121450 7 Social security tips	XXX-XX-1696 8 Allocated tips	20-8121450 7 Social security tips	XXX-XX-1696 8 Allocated tips	20-8121450 7 Social security tips	XXX-XX-1696 8 Allocated tips
9	10 Dependent care benefits	9	10 Dependent care benefits	9	10 Dependent care benefits
11 Nonqualified plans	12a See instructions for box 12	11 Nonqualified plans	12a	11 Nonqualified plans	12a
14 Other	12b	14 Other	12b	14 Other	12b
	12c		12c		12c
	12d		12d		12d
	13 Stat emp.Ret. plan 3rd party sick pay		13 Stat emp. Ret. plan 3rd party sick pay		13 Stat emp. Ret. plan 3rd party sick pay
e/f Employee's name, address an	nd ZIP code	e/f Employee's name, address a	nd ZIP code	e/f Employee's name, address an	nd ZIP code
MANOGJNA SINDHU	POTLURI	MANOGJNA SINDHU	POTLURI	MANOGJNA SINDHU	POTLURI
3110 THE COMMONS	DR	3110 THE COMMONS DR		3110 THE COMMONS	DR
CUMMING, GA 33041		CUMMING, GA 33041		CUMMING, GA 33041	
15 State Employer's state ID no. GA 3054192-ZH	. 16 State wages, tips, etc. 12000.00	15 State Employer's state ID no. GA 3054192-ZH	16 State wages, tips, etc. 12000.00	15 State Employer's state ID no. GA 3054192-ZH	. 16 State wages, tips, etc. 12000.00
17 State income tax <b>492.60</b>	18 Local wages, tips, etc.	<sup>17</sup> State income tax <b>492.60</b>	18 Local wages, tips, etc.	17 State income tax 492.60	18 Local wages, tips, etc.
19 Local income tax	20 Locality name	19 Local income tax	20 Locality name	19 Local income tax	20 Locality name
Federal Fi	ling Copy	GA.State Re	eference Copy	GA.State Fil	ling Copy
W-2 Wage a Statem Copy B to be filed with employee's Fe		W-2 Wage a Statemen Copy 2 to be filed with employee's State	nt OMB No 1545-0008	W-2 Wage all Statem Copy 2 to be filed with employee's State	ent 0MB No 1545,0008