

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

c Employer's name, address, and ZIP code
 UH SYSTEM CONSOLIDATED
 5000 GULF FWY
 ROOM 109
 HOUSTON TX 77204
e Employee's name, address, and ZIP code
 SRI HARSHA BANDARU
 APT 201
 2250 HOLLY HALL ST
 HOUSTON TX 77054-3937

		7 Social security tips	1 Wages, tips, other comp.	2 Federal income tax withheld		
			7350.00	323.96		
		8 Allocated tips	3 Social security wages	4 Social security tax withheld		
			5050.00	313.10		
		9	5 Medicare wages and tips	6 Medicare tax withheld		
			5050.00	73.23		
		10 Dependent care benefits	11 Nonqualified plans	12a See instructions for box 12		
		13 <small>Statutory employee</small> <small>Retirement plan</small> <small>Third-party sick pay</small>	14 Other	12b		
		b Employer identification number (EIN)		12c		
		74-6001399				
		a Employee's social security no.		12d		
		631-43-4974				
15 State	Employer's state I.D. no.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Copy B To Be Filed With Employee's FEDERAL Tax Return This information is being furnished to the Internal Revenue Service. **Dept. of the Treasury - IRS**
 OMB No. 1545-0008 Visit the IRS Web Site at www.irs.gov/efile

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.

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Copy C For EMPLOYEE'S RECORDS (See Notice to Employee on back of Copy B) OMB No. 1545-0008 **Dept. of the Treasury - IRS**

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