2021 W-2 and EARNINGS SUMMARY



Employee Reference Copy
Wage and Tax
Statement
Copy C for employee's records.
d Control number
Dept. Corp. Employer use only
A 13

Employer's name, address, and ZIP code

LEX NIMBLE SOLUTIONS INC 1699 E WOODFIELD RD SUITE 565 SCHAUMBURG, IL 60173

Batch #91626

e/f Employee's name, address, and ZIP code SUNEELA MADHAVI ATMAKURI 1808 GLENGATE CIRCLE MORRISVILLE, NC 27560

b	Emplo	yer's FED II 20-0946 6		а	Empl		ee's SS			
1	Wages	s, tips, other	comp.	2	Feder	al	income	tax v	withheld	d
		105	854.18					176	327.4°	1
3	Social	security wa	ges	4	Socia	l s	security	tax v	vithhelo	1
		105	854.18					65	562.9	6
5	Medica	are wages a		6	Medic	ar	e tax wi			
		105	854.18					15	534.89	9
7	Social	security tip	s	8	Alloca	ate	d tips			
9				10	Depen	de	nt care	bene	fits	
11	Nonqu	alified plans	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	12	a See ir	sti	ructionsfo	r box	12	
11	Other			12		Π				
14	Other			12	С	<u> </u>				
				12						
				13	Stat er	np	Ret. plan	3rd p	arty sick	c pay
15	State	Employer's	state ID no.	16	State	w	ages, tip	s, et	c.	
1	NC	60082333	34				1	058	354.1	8
17	State	income tax		18	Local	w	ages, tip	s, et	c.	
		5	020.00							
19	Local	income tax		20	Local	ity	name			

1 Wages, tips, other comp. 105854.18 2 Federal income tax withheld 17627.41
3 Social security wages 105854.18 4 Social security tax withheld 6562.96
5 Medicare wages and tips 105854.18 6 Medicare tax withheld 1534.89
d Control number Dept. Corp. Employer use only 000200 RM/CWY A 13
c Employer's name, address, and ZIP code

LEX NIMBLE SOLUTIONS INC 1699 E WOODFIELD RD SUITE 565 SCHAUMBURG, IL 60173

b	Employer's FED ID number 20-0946615	a Employee's SSA number XXX-XX-9716
7	Social security tips	8 Allocated tips
9		10 Dependent care benefits
11	Nonqualified plans	12a See instructions for box 12
14	Other	12b
		12c
		12d
		13 Stat emp. Ret. plan 3rd party sick pay
e/f	Employee's name, address ar	nd ZIP code

SUNEELA MADHAVI ATMAKURI 1808 GLENGATE CIRCLE MORRISVILLE, NC 27560

| 15 | State | Employer's state ID no. | 16 | State wages, tips, etc. | 105854.18 | 17 | State income tax | 18 | Local wages, tips, etc. | 19 | Local income tax | 20 | Locality name | 20 | Locality name | 21 | Locality name | 22 | Locality name | 23 | Locality name | 24 | Locality name | 25 | Locality name | 26 | Locality name | 27 | Locality name | 28 | Locality name | 27 | Locality name | 28 | Locality name | 29 | Locality name | 29 | Locality name | 29 | Locality name | 20 | Locality

Federal Filing Copy

Wage and Tax
Statement
Copy B to be filed with employee's Federal Income Tax Return.

This blue section is your Earnings Summary which provides more detailed information on the generation of your W-2 statement. The reverse side includes instructions and other general information.

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	NC. State Wages, Tips, Etc. Box 16 of W-2	
Gross Pay	111,400.00	111,400.00	111,400.00	111,400.00	
Less Other Cafe 125	5,545.82	5,545.82	5,545.82	5,545.82	
Reported W-2 Wages	105,854.18	105,854.18	105,854.18	105,854.18	

2. Employee Name and Address.

105854.18

SUNEELA MADHAVI ATMAKURI 1808 GLENGATE CIRCLE MORRISVILLE, NC 27560

2 Federal income tax withheld

17627.41

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4 Social security tax withheld 6562.96				
6 Medicare tax withheld 1534.89				
Corp. Employer use only				
A 13				
nd ZIP code				
DLUTIONS INC ELD RD SUITE 565 IL 60173				
a Employee's SSA number				
8 Allocated tips				
10 Dependent care benefits				
12a				
12b				
12c				
12d				
13 Stat emp. Ret. plan 3rd party sick pay				
nd ZIP code				
ATMAKURI				
CLE				
7560				
. 16 State wages, tips, etc.				
105854.18				
18 Local wages, tips, etc.				
20 Locality name				
eference Copy				
nd Tax 2021				
nt OMB No 1545 0008				
OMB No. 1545-0008				

1				2	Federal income tax withheld				
		1058	54.18			17	627	.41	
3	Social security wages 105854.18			4	Social security tax withheld 6562.96				
5	Medicar	e wages and 1058	tips 54.18	6	Medica	re tax withhe	ld 534	.89	
d	Control	number	Dept.		Corp.	Employer	use	only	
00	0200	RM/CWY				Α		13	
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LEX NIMBLE SOLUTIONS INC 1699 E WOODFIELD RD SUITE 565 SCHAUMBURG, IL 60173

b	Employer's FED ID number 20-0946615	a Employee's SSA number XXX-XX-9716				
7	Social security tips	8 Allocated tips				
9		10 Dependent care benefits				
11	Nonqualified plans	12a				
14	Other	12b				
		12c				
		12d				
		13 Stat emp. Ret. plan 3rd party sick pa				

e/f Employee's name, address and ZIP code

SUNEELA MADHAVI ATMAKURI 1808 GLENGATE CIRCLE MORRISVILLE, NC 27560

	State IC	Employer's state ID no. 600823334	16	State wa	iges,	tips, etc. 105854.18
17	State	income tax	18	Local wa	ages,	tips, etc.
		5020.00				
19	Local	income tax	20	Locality	name	9

NC.State Filing Copy

Wage and Tax
Statement
Copy 2 to be filed with employee's State Income Tax
Return.

NC.State Filing Copy

Wage and Tax
State Piling Copy

Return.

Return.