

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

c Employer's name, address, and ZIP code
 STATE OF KANSAS
 700 SW HARRISON
 EISENHOWER BLDG-SUITE 300
 TOPEKA KS 66603-3929

e Employee's name, address, and ZIP code
 SANGAMESWARA SAI MOVVA
 2330 N OLIVER ST APT 1207
 WICHITA KS 67220-2926

7 Social security tips	1 Wages, tips, other comp. 7614.00	2 Federal income tax withheld 3.53
8 Allocated tips	3 Social security wages	4 Social security tax withheld
9	5 Medicare wages and tips	6 Medicare tax withheld
10 Dependent care benefits	11 Nonqualified plans	12a See instructions for box 12 DD 1966.50
13 Statutory employee Retirement plan Third-party sick pay	14 Other	12b
b Employer identification number (EIN) 48-6029925		12c
a Employee's social security no. 797-13-7151		12d

15 State KS	Employer's state I.D. no. B002290051	16 State wages, tips, etc. 7614.00	17 State income tax 147.76	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
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Copy B To Be Filed With Employee's FEDERAL Tax Return

This information is being furnished to the Internal Revenue Service.
OMB No. 1545-0008

Dept. of the Treasury - IRS
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)

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

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