

FORM W-2 Wage and Tax Statement

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

Dept. of the Treasury • Internal Revenue Service

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 Wage 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.

The white copies of the W-2 forms are for your tax returns, the blue copy is for your records. General instructions, including an explanation of the letter codes in box 12, are on the other side of the page. To the right is an explanation of your W-2 wages. Please note that the Gross amount may include adjustments.	Gross Wages	Federal Box 1 31840.89	Soc Sec Box 3 and 7 31840.89	Medicare Box 5 31840.89
	Tax/ Benefits			
	Group Term Life	35.04	35.04	35.04
	Adoption			
	Deferred Comp	(1873.35)		
	Section 125	(2767.62)	(2767.62)	(2767.62)
	Other Pretax/Wage Limit			
W-2 Wages	27234.96	29108.31	29108.31	

D. CONTROL NUMBER 000398041101	This information is being furnished to the Internal Revenue Service	2021	OMB NO. 1545 - 0008	1. WAGES, TIPS, OTHER COMPENSATION 27234.96	2. FEDERAL INCOME TAX WITHHELD 1378.76
B. EMPLOYER IDENTIFICATION NUMBER 56-1323952	A. EMPLOYEE'S SOCIAL SECURITY NUMBER 627-53-0093			3. SOCIAL SECURITY WAGES 29108.31	4. SOCIAL SECURITY TAX WITHHELD 1804.72
C. EMPLOYER'S NAME, ADDRESS, AND ZIP CODE IQVIA RDS, Inc. 4820 Emperor Blvd Durham NC 27703				5. MEDICARE WAGES AND TIPS 29108.31	6. MEDICARE TAX WITHHELD 422.07
E. EMPLOYEE'S FIRST NAME AND INITIAL Spandana				7. SOCIAL SECURITY TIPS	8. ALLOCATED TIPS
LAST NAME Palwai				9.	10. DEPENDENT CARE BENEFITS
SUFF SUFL				11. NONQUALIFIED PLANS	12. a-d
13. <input type="checkbox"/> Statutory Employee <input checked="" type="checkbox"/> Retirement Plan <input type="checkbox"/> Third-Party Sick Pay				14. OTHER	C 35.04 D 1873.35 W 1999.98 DD 3498.12
F. EMPLOYEE'S ADDRESS AND ZIP CODE 405 Boscaawen Lane Cary NC 27519 USA				15. STATE NC	16. STATE WAGES, TIPS, ETC. 27234.96
				17. STATE INCOME TAX 1286.00	18. LOCAL WAGES, TIPS, ETC.
				19. LOCAL INCOME TAX	20. LOCALITY NAME

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W-2 AND WAGE SUMMARY