

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

c Employer's name, address, and ZIP code
 INTELLIGRATED SERVICES, LLC
 855 S. MINT ST.
 18TH FLOOR PAYROLL
 CHARLOTTE NC 28202

e Employee's name, address, and ZIP code
 NIKHIL MALLALA
 12155 BRISBEN PLACE
 CINCINNATI OH 45249

		7 Social security tips	1 Wages, tips, other comp. 65044.04	2 Federal income tax withheld 9223.14
		8 Allocated tips	3 Social security wages 68563.32	4 Social security tax withheld 4250.93
		9	5 Medicare wages and tips 68563.32	6 Medicare tax withheld 994.17
		10 Dependent care benefits	11 Nonqualified plans	12a See instructions for box 12 C 33.06
		13 Statutory employee <input type="checkbox"/> Retirement plan <input checked="" type="checkbox"/> Third-party sick pay <input type="checkbox"/>	14 Other	12b D 3519.28
		b Employer identification number (EIN) 46-3306859		12c DD 4507.49
		a Employee's social security no. 349-61-1439		12d
15 State OH	Employer's state I.D. no. 530555218	16 State wages, tips, etc. 65044.04	17 State income tax 2028.98	18 Local wages, tips, etc. 68563.32
			19 Local income tax 767.94	20 Locality name MASON

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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