



**W-2** Wage and Tax Statement **2021**  
 Copy C for employee's records. OMB No. 1545-0008

d Control number 000090 KG/ELO	Dept.	Corp.	Employer use only <b>A</b>	49
c Employer's name, address, and ZIP code <b>NEBULA PARTNERS LLC 5755 N POINT PKWY STE 58 ALPHARETTA, GA 30022 1172</b>				
Batch #91074				
e/f Employee's name, address, and ZIP code <b>MYTHRI MASETTI 1700E 13TH ST APT 16K CLEVELAND, OH 44114</b>				
b Employer's FED ID number <b>45-2481302</b>	a Employee's SSA number <b>XXX-XX-4040</b>			
1 Wages, tips, other comp. <b>57174.00</b>	2 Federal income tax withheld <b>7903.32</b>			
3 Social security wages	4 Social security tax withheld			
5 Medicare wages and tips	6 Medicare tax withheld			
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	
15 State	Employer's state ID no.	16 State wages, tips, etc.		
17 State income tax	18 Local wages, tips, etc.			
19 Local income tax	20 Locality name			

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
Gross Pay	58,246.00	58,246.00	58,246.00
Less Other Cafe 125	1,072.00	N/A	N/A
<b>Reported W-2 Wages</b>	<b>57,174.00</b>	<b>0.00</b>	<b>0.00</b>

2. Employee Name and Address.

**MYTHRI MASETTI  
1700E 13TH ST  
APT 16K  
CLEVELAND, OH 44114**

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19 Local income tax	20 Locality name			

**W-2** Wage and Tax Statement **2021**  
 Copy B to be filed with employee's Federal Income Tax Return. OMB No. 1545-0008

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e/f Employee's name, address and ZIP code <b>MYTHRI MASETTI 1700E 13TH ST APT 16K CLEVELAND, OH 44114</b>				
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17 State income tax	18 Local wages, tips, etc.			
19 Local income tax	20 Locality name			

**W-2** Wage and Tax Statement **2021**  
 Copy 2 to be filed with employee's State Income Tax Return. OMB No. 1545-0008

1 Wages, tips, other comp. <b>57174.00</b>	2 Federal income tax withheld <b>7903.32</b>			
3 Social security wages	4 Social security tax withheld			
5 Medicare wages and tips	6 Medicare tax withheld			
d Control number 000090 KG/ELO	Dept.	Corp.	Employer use only <b>A</b>	49
c Employer's name, address, and ZIP code <b>NEBULA PARTNERS LLC 5755 N POINT PKWY STE 58 ALPHARETTA, GA 30022 1172</b>				
b Employer's FED ID number <b>45-2481302</b>	a Employee's SSA number <b>XXX-XX-4040</b>			
7 Social security tips	8 Allocated tips			
9	10 Dependent care benefits			
11 Nonqualified plans	12a			
14 Other	12b			
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	12d			
	13 Stat emp.	Ret. plan	3rd party sick pay	
e/f Employee's name, address and ZIP code <b>MYTHRI MASETTI 1700E 13TH ST APT 16K CLEVELAND, OH 44114</b>				
15 State	Employer's state ID no.	16 State wages, tips, etc.		
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19 Local income tax	20 Locality name			

**W-2** Wage and Tax Statement **2021**  
 Copy 2 to be filed with employee's City or Local Income Tax Return. OMB No. 1545-0008