Copy B – To Be Filed Wi FEDERAL Tax Return.	th Employee's	41-085 OMB No. 1		Copy 2 – To Be Filed V State, City, or Local II				41-0852411 B No. 1545-0008
Employee's soc. sec. no.	1 Wages, tips, other comp.	2 Federal income tax with		a Employee's soc. sec. no.		, tips, other comp.	2 Federal income t	
712-96-8466	45687.15 3 Social security wages	4 Social security tax with	5108.71	712-96-8466	3 Social s	45687.15 security wages	4 Social security ta	5108.7 x withheld
Employer ID number (EIN)	11868.30	4 Social Security tax with	735.83	b Employer ID number (EIN)		11868.30	+ Social Security ta	735.8
46-4381195	5 Medicare wages and tips 11868.30	6 Medicare tax withheld	172.09	46-4381195	5 Medica	re wages and tips 11868.30	6 Medicare tax with	hheld 172.0
Employer's name, address, and				c Employer's name, address, a	and ZIP code			
Impact Outsourcing S	Solutions IX LLC			Impact Outsourcing	g Solutior	ns IX LLC		
300 WILSON RD BLDG 800				300 WILSON RD BLDG 800				
GRIFFIN, GA 30224				GRIFFIN, GA 3022	4			
Control number				d Control number				
Employee's name, address, and	d ZIP code		Suff.	e Employee's name, address, a	and ZIP code	2		S
SPANDANA VOTTE	М			SPANDANA VOTT	EM			
13838 THE LAKES B	LVD APT 9209			13838 THE LAKES	BLVD A	PT 9209		
Pflugerville, TX 78660				Pflugerville, TX 786				
Social security tips 8 Allocated tips 9 0.00 0.00				7 Social security tips 8 Allocated tips 9 0.00 0.00 0.00 0.00			9	
Dependent care benefits	11 Nonqualified plans	12a Code See inst. for	box 12	10 Dependent care benefits		Nonqualified plans	12a Code	
Statutory employee 14	Other	1 2b Code		13 Statutory employee	14 Other		12b Code	
Statutory employee 14	other	12b Code		15 Statutory employee	14 Other		120 Code	
etirement plan		12c Code		Retirement plan			12c Code	
hird-party sick pay		1 2d Code		Third-party sick pay			12d Code	
						1		
State Employer's state ID num Local wages, tips, etc.	ber 16 State wages, tips, etc. 19 Local income tax	17 State income tax 20 Locality name	x	15 State Employer's state I.D. 18 Local wages, tips, etc.	number 19 I	16 State wages, tips, etc.	17 State inco 20 Locality name	
				1				
	ement 2021 d to the Internal Revenue Service.	-	Treasury IRS ww.irs.gov/efile	Form W-2 Wage and Tax St 	atement	2021	Dept.	of the Treasury
s information is being furnished	d to the Internal Revenue Service.	-	<i>ww.irs.gov/efile</i>	Form W-2 Wage and Tax St Copy 2 – To Be Filed W City, or Local Income T	/ith Emplo	oyee's State,		of the Treasury 41-0852411 B No. 1545-0008
s information is being furnished opy C – For EMPLOYEI lotice to Employee on the Employee's soc. sec. no.	d to the Internal Revenue Service.	41-085;	ww.irs.gov/efile 2411 545-0008	Copy 2 – To Be Filed W City, or Local Income T a Employee's soc. sec. no.	Vith Emplo	oyee's State,		41-0852411 B No. 1545-0008 tax withheld
s information is being furnished opy C – For EMPLOYEI blice to Employee on the Employee's soc. sec. no. 712-96-8466	t to the Internal Revenue Service. SRECORDS (See back of Copy B.) Wages, tips, other comp. 45687.15 Social security wages	41-085 OMB No. 1:	2411 545-0008 infeld 5108.71 held	Copy 2 – To Be Filed W City, or Local Income T a Employee's soc. sec. no. 712-96-8466	Vith Emplo Fax Return 1 Wages,	byee's State, 1. tips, other comp. 45687.15 security wages		41-0852411 B No. 1545-0008 tax withheld 5108. x withheld
s information is being furnished opy C – For EMPLOYEI blice to Employee on the imployee's soc. sec. no. 712-96-8466 imployer ID number (EIN)	t to the Internal Revenue Service.	41-085 OMB No. 1 2 Federal income tax with	ww.irs.gov/efile 2411 545-0008 iheld 5108.71	Copy 2 – To Be Filed W City, or Local Income T a Employee's soc. sec. no. 712-96-8466 b Employer ID number (EIN)	Vith Emplo Fax Return 1 Wages, 3 Social s	byee's State, 1. tips, other comp. 45687.15	OMI 2 Federal income t	41-0852411 B No. 1545-0008 tax withheid 5108. ix withheid 735.
Copy C – For EMPLOYE Iotice to Employee on the Employee's soc. sec. no. 712-96-8466 Employer ID number (EIN) 46-4381195	t to the Internal Revenue Service. S RECORDS (See back of Copy B.) Wages, tips, other comp. 45687.15 Social security wages 11868.30 Medicare wages and tips 11868.30	41-085 OMB No. 11 2 Federal income tax with 4 Social security tax with	2411 545-0008 infeld 5108.71 held	Copy 2 – To Be Filed W City, or Local Income T a Employee's soc. sec. no. 712-96-8466 b Employer ID number (EIN) 46-4381195	Vith Emplo Tax Return 1 Wages, 3 Social s 5 Medica	byce's State, tips, other comp. 45687.15 security wages 11868.30 ire wages and tips 11868.30	OMI 2 Federal income t 4 Social security ta	41-0852411 B No. 1545-0008 tax withheid 5108.7 ix withheid 735.8 nheid
s information is being furnisher bopy C – For EMPLOYEI botice to Employee on the Employee's soc. sec. no. 712-96-8466 Employer ID number (EIN) 46-4381195 Employer's name, address, and	t to the Internal Revenue Service. S RECORDS (See back of Copy B.) Wages, tips, other comp. 45687.15 Social security wages 11868.30 Medicare wages and tips 11868.30 ZIP code	41-085 OMB No. 11 2 Federal income tax with 4 Social security tax with	ww.irs.gov/efile	Copy 2 – To Be Filed W City, or Local Income T a Employee's soc. sec. no. 712-96-8466 b Employer ID number (EIN) 46-4381195 c Employer's name, address, a	Vith Emplo ax Return Wages, 3 Social s 5 Medica and ZIP code	byee's State, tips, other comp. 45687.15 security wages 11868.30 ire wages and tips 11868.30	OMI 2 Federal income t 4 Social security ta	41-0852411 B No. 1545-0008 tax withheld 5108. ix withheld 735.4 nheld
s information is being furnished opy C – For EMPLOYEI bitice to Employee on the Employee's soc. sec. no. 712-96-8466 Employer ID number (EIN) 46-4381195 Employer's name, address, and Impact Outsourcing S	t to the Internal Revenue Service. SRECORDS (See back of Copy B.) Wages, tips, other comp. 45687.15 Social security wages 11868.30 Medicare wages and tips 11868.30 ZIP code Solutions IX LLC	41-085 OMB No. 11 2 Federal income tax with 4 Social security tax with	ww.irs.gov/efile	Copy 2 - To Be Filed W City, or Local Income T a Employee's soc. sec. no. 712-96-8466 b Employer ID number (EIN) 46-4381195 c Employer's name, address, a Impact Outsourcing	Vith Emplo rax Return 1 Wages, 3 Social s 5 Medica and ZIP code g Solution	byee's State, tips, other comp. 45687.15 security wages 11868.30 re wages and tips 11868.30 ns IX LLC	OMI 2 Federal income t 4 Social security ta	41-0852411 B No. 1545-0008 tax withheld 5108. ix withheld 735.4 nheld
s information is being furnished topy C – For EMPLOYEI totice to Employee on the Employee's soc. sec. no. 712-96-8466 Employer ID number (EIN) 46-4381195 Employer's name, address, and Impact Outsourcing = 300 WILSON RD BL	t to the Internal Revenue Service. SRECORDS (See back of Copy B.) Wages, tips, other comp. 45687.15 Social security wages 11868.30 Medicare wages and tips 11868.30 ZIP code Solutions IX LLC	41-085 OMB No. 11 2 Federal income tax with 4 Social security tax with	ww.irs.gov/efile	Copy 2 – To Be Filed W City, or Local Income T a Employee's soc. sec. no. 712-96-8466 b Employer ID number (EIN) 46-4381195 c Employer's name, address, a Impact Outsourcing 300 WILSON RD B	/ith Emplo fax Return Wages, 3 Social 9 5 Medica and ZIP code g Solutior 8LDG 800	byee's State, tips, other comp. 45687.15 security wages 11868.30 re wages and tips 11868.30 ns IX LLC	OMI 2 Federal income t 4 Social security ta	41-0852411 B No. 1545-0008 tax withheld 5108.7 ix withheld 735.8 nheld
s information is being furnished opy C – For EMPLOYEI otice to Employee on the Employee's soc. sec. no. 712-96-8466 Employer ID number (EIN) 46-4381195 Employer's name, address, and Impact Outsourcing S 300 WILSON RD BL GRIFFIN, GA 30224	t to the Internal Revenue Service. SRECORDS (See back of Copy B.) Wages, tips, other comp. 45687.15 Social security wages 11868.30 Medicare wages and tips 11868.30 ZIP code Solutions IX LLC	41-085 OMB No. 11 2 Federal income tax with 4 Social security tax with	ww.irs.gov/efile	Copy 2 – To Be Filed W City, or Local Income T a Employee's soc. sec. no. 712-96-8466 b Employer ID number (EIN) 46-4381195 c Employer's name, address, a Impact Outsourcing 300 WILSON RD B GRIFFIN, GA 3022	/ith Emplo fax Return Wages, 3 Social 9 5 Medica and ZIP code g Solutior 8LDG 800	byee's State, tips, other comp. 45687.15 security wages 11868.30 re wages and tips 11868.30 ns IX LLC	OMI 2 Federal income t 4 Social security ta	41-0852411 B No. 1545-0008 tax withheld 5108.7 ix withheld 735.8 nheld
s information is being furnisher bopy C – For EMPLOYEI botice to Employee on the Employee's soc. sec. no. 712-96-8466 Employer ID number (EIN) 46-4381195 Employer's name, address, and	t to the Internal Revenue Service. SRECORDS (See back of Copy B.) Wages, tips, other comp. 45687.15 Social security wages 11868.30 Medicare wages and tips 11868.30 ZIP code Solutions IX LLC	41-085 OMB No. 11 2 Federal income tax with 4 Social security tax with	ww.irs.gov/efile	Copy 2 – To Be Filed W City, or Local Income T a Employee's soc. sec. no. 712-96-8466 b Employer ID number (EIN) 46-4381195 c Employer's name, address, a Impact Outsourcing 300 WILSON RD B	/ith Emplo fax Return Wages, 3 Social 9 5 Medica and ZIP code g Solutior 8LDG 800	byee's State, tips, other comp. 45687.15 security wages 11868.30 re wages and tips 11868.30 ns IX LLC	OMI 2 Federal income t 4 Social security ta	41-0852411 B No. 1545-0008 tax withheld 5108. ix withheld 735.4 nheld
s information is being furnished opy C – For EMPLOYEI botice to Employee on the Employee's soc. sec. no. 712-96-8466 Employer ID number (EIN) 46-4381195 Employer's name, address, and Impact Outsourcing a 300 WILSON RD BL GRIFFIN, GA 30224 Control number Employee's name, address, and	t to the Internal Revenue Service. SRECORDS (See back of Copy B.) Wages, tips, other comp. 45687.15 Social security wages 11868.30 Medicare wages and tips 11868.30 ZIP code Solutions IX LLC DG 800 d ZIP code	41-085 OMB No. 11 2 Federal income tax with 4 Social security tax with	ww.irs.gov/efile	Copy 2 – To Be Filed W City, or Local Income T a Employee's soc. sec. no. 712-96-8466 b Employer ID number (EIN) 46-4381195 c Employer's name, address, a Impact Outsourcing 300 WILSON RD B GRIFFIN, GA 3022 d Control number e Employee's name, address,	/ith Emplo fax Return 1 Wages, 3 Social s 5 Medica and ZIP code 3 Solution 8LDG 800 24	pyee's State, tips, other comp. 45687.15 security wages 11868.30 re wages and tips 11868.30 ns IX LLC	OMI 2 Federal income t 4 Social security ta	41-0852411 B No. 1545-0008 tax withheld 5108.7 ix withheld 735.8 hheld 172.0
s information is being furnished opy C – For EMPLOYEI botice to Employee on the Employee's soc. sec. no. 712-96-8466 Employer ID number (EIN) 46-4381195 Employer's name, address, and Impact Outsourcing a 300 WILSON RD BL GRIFFIN, GA 30224 Control number Employee's name, address, and	t to the Internal Revenue Service. SRECORDS (See back of Copy B.) Wages, tips, other comp. 45687.15 Social security wages 11868.30 Medicare wages and tips 11868.30 ZIP code Solutions IX LLC DG 800 d ZIP code	41-085 OMB No. 11 2 Federal income tax with 4 Social security tax with	ww.irs.gov/efile	Copy 2 – To Be Filed W City, or Local Income T a Employee's soc. sec. no. 712-96-8466 b Employer ID number (EIN) 46-4381195 c Employer's name, address, a Impact Outsourcing 300 WILSON RD B GRIFFIN, GA 3022 d Control number	/ith Emplo fax Return 1 Wages, 3 Social s 5 Medica and ZIP code 3 Solution 8LDG 800 24	pyee's State, tips, other comp. 45687.15 security wages 11868.30 re wages and tips 11868.30 ns IX LLC	OMI 2 Federal income t 4 Social security ta	41-0852411 B No. 1545-0008 tax withheld 5108.7 x withheld 735.8 hheld 172.0
s information is being furnished opy C – For EMPLOYEI brice to Employee on the Employee's soc. sec. no. 712-96-8466 Employer ID number (EIN) 46-4381195 Employer's name, address, and Impact Outsourcing a 300 WILSON RD BL GRIFFIN, GA 30224 Control number Employee's name, address, and SPANDANA VOTTE	t to the Internal Revenue Service. SRECORDS (See back of Copy B.) Wages, tips, other comp. 45687.15 Social security wages 11868.30 Medicare wages and tips 11868.30 ZIP code Solutions IX LLC DG 800 d ZIP code M	41-085 OMB No. 11 2 Federal income tax with 4 Social security tax with	ww.irs.gov/efile	Copy 2 – To Be Filed W City, or Local Income T a Employee's soc. sec. no. 712-96-8466 b Employer ID number (EIN) 46-4381195 c Employer's name, address, a Impact Outsourcing 300 WILSON RD B GRIFFIN, GA 3022 d Control number e Employee's name, address, SPANDANA VOTT	/ith Emplo fax Return 1 Wages, 3 Social s 5 Medica and ZIP code 3 Solution 8LDG 800 24 and ZIP code EM	e	OMI 2 Federal income t 4 Social security ta	41-0852411 B No. 1545-0008 tax withheld 5108.7 x withheld 735.8 hheld 172.0
s information is being furnished opy C – For EMPLOYEI botice to Employee on the Employee's soc. sec. no. 712-96-8466 Employer ID number (EIN) 46-4381195 Employer's name, address, and Impact Outsourcing i 300 WILSON RD BL GRIFFIN, GA 30224 Control number Employee's name, address, an SPANDANA VOTTE 13838 THE LAKES E	t to the Internal Revenue Service. S RECORDS (See back of Copy B.) Wages, tips, other comp. 45687.15 Social security wages 11868.30 Medicare wages and tips 11868.30 ZIP code Solutions IX LLC DG 800 d ZIP code M BLVD APT 9209	41-085 OMB No. 11 2 Federal income tax with 4 Social security tax with	ww.irs.gov/efile	Copy 2 - To Be Filed W City, or Local Income T a Employee's soc. sec. no. 712-96-8466 b Employer ID number (EIN) 46-4381195 c Employer's name, address, a Impact Outsourcing 300 WILSON RD B GRIFFIN, GA 3022 d Control number e Employee's name, address, SPANDANA VOTT 13838 THE LAKES	Vith Emplo Tax Return 1 Wages, 3 Social s 5 Medica 3 Solution 3 Code 9 Solution 3 LDG 800 24 and ZIP code EM BLVD A	e	OMI 2 Federal income t 4 Social security ta	41-0852411 B No. 1545-0008 tax withheld 5108.7 x withheld 735.8 hheld 172.0
s information is being furnished opy C – For EMPLOYEI brice to Employee on the Employee's soc. sec. no. 712-96-8466 Employer ID number (EIN) 46-4381195 Employer's name, address, and Impact Outsourcing a 300 WILSON RD BL GRIFFIN, GA 30224 Control number Employee's name, address, an SPANDANA VOTTE 13838 THE LAKES E Pflugerville, TX 7866 Social security tips	t to the Internal Revenue Service. S RECORDS (See back of Copy B.) Wages, tips, other comp. 45687.15 Social security wages 11868.30 Medicare wages and tips 11868.30 Medicare wages and tips 11868.30 Allocated tips 8 Allocated tips	41-085 OMB No. 11 2 Federal income tax with 4 Social security tax with	ww.irs.gov/efile	Copy 2 – To Be Filed W City, or Local Income T a Employee's soc. sec. no. 712-96-8466 b Employer ID number (EIN) 46-4381195 c Employer's name, address, a Impact Outsourcing 300 WILSON RD B GRIFFIN, GA 3022 d Control number e Employee's name, address, SPANDANA VOTT 13838 THE LAKES Pflugerville, TX 786 7 Social security tips	/ith Emplo fax Return 1 Wages, 3 Social s 5 Medica and ZIP code 3 Solution 3LDG 800 24 and ZIP code EM BLVD A 60 8 A	pyee's State, tips, other comp. 45687.15 security wages 11868.30 re wages and tips 11868.30 ns IX LLC D e PT 9209 llocated tips	OMI 2 Federal income t 4 Social security ta	41-0852411 B No. 1545-0008 tax withheld 5108.7 ix withheld 735.8 hheld 172.0
information is being furnished opy C – For EMPLOYEI brice to Employee on the imployee's soc. sec. no. 12-96-8466 imployer ID number (EIN) 16-4381195 imployer's name, address, and Impact Outsourcing 3 300 WILSON RD BL GRIFFIN, GA 30224 introl number imployee's name, address, and SPANDANA VOTTE 13838 THE LAKES E Pflugerville, TX 7866 ocial security tips 0.00	t to the Internal Revenue Service. S RECORDS (See back of Copy B.) Wages, tips, other comp. 45687.15 Social security wages 11868.30 Medicare wages and tips 11868.30 Medicare wages and tips 11868.30 Allocated tips 8 Allocated tips	41-085; OMB No. 11 2 Federal income tax with 4 Social security tax with 6 Medicare tax withheld	ww.irs.gov/efile	Copy 2 – To Be Filed W City, or Local Income T a Employee's soc. sec. no. 712-96-8466 b Employer ID number (EIN) 46-4381195 c Employer's name, address, a Impact Outsourcing 300 WILSON RD B GRIFFIN, GA 3022 d Control number e Employee's name, address, SPANDANA VOTT 13838 THE LAKES Pflugerville, TX 786 7 Social security tips 0.	/ith Emplo fax Return 1 Wages, 3 Social s 5 Medica and ZIP code 3 Solution 3LDG 800 24 and ZIP code EM BLVD A 60 00	pyee's State, tips, other comp. 45687.15 security wages 11868.30 re wages and tips 11868.30 ns IX LLC b e PT 9209 llocated tips 0.00	OMI 2 Federal income t 4 Social security ta 6 Medicare tax with	41-0852411 B No. 1545-0008 tax withheld 5108.7 ix withheld 735.8 hheld 172.0
ppy C – For EMPLOYEI brice to Employee on the imployee's soc. sec. no. '12-96-8466 imployer ID number (EIN) 46-4381195 imployer's name, address, and Impact Outsourcing 1 300 WILSON RD BL GRIFFIN, GA 30224 iontrol number imployee's name, address, an SPANDANA VOTTE 13838 THE LAKES E Pflugerville, TX 7866 iocial security tips 0.00 Dependent care benefits	t to the Internal Revenue Service. SRECORDS (See back of Copy B.) Wages, tips, other comp. 45687.15 Social security wages Nedicare wages and tips 11868.30 Medicare wages and tips 11868.30 ZIP code Solutions IX LLC DG 800 d ZIP code M SLVD APT 9209 0	9 9 41-086: OMB No. 1: 4 Social security tax with 6 Medicare tax withheld 9 12a Code See inst. for	ww.irs.gov/efile	Copy 2 – To Be Filed W City, or Local Income T a Employee's soc. sec. no. 712-96-8466 b Employer ID number (EIN) 46-4381195 c Employer's name, address, a Impact Outsourcing 300 WILSON RD B GRIFFIN, GA 3022 d Control number e Employee's name, address, SPANDANA VOTT 13838 THE LAKES Pflugerville, TX 786 7 Social security tips 0.	/ith Emplo fax Return 1 Wages, 3 Social 6 5 Medica and ZIP code g Solution BLDG 800 4 and ZIP code EM BLVD A 60 8 A 00	pyee's State, tips, other comp. 45687.15 security wages 11868.30 re wages and tips 11868.30 ns IX LLC D e PT 9209 llocated tips	OMI Federal income t Social security ta 6 Medicare tax with	41-0852411 B No. 1545-0008 tax withheld 5108.7 x withheld 735.8 hheld 172.0
s information is being furnished opy C – For EMPLOYEI btice to Employee on the imployee's soc. sec. no. 712-96-8466 imployer ID number (EIN) 46-4381195 imployer's name, address, and Impact Outsourcing a 300 WILSON RD BL GRIFFIN, GA 30224 iontrol number imployee's name, address, an SPANDANA VOTTE 13838 THE LAKES E Pflugerville, TX 7866 iocial security tips 0.00 Dependent care benefits	t to the Internal Revenue Service. SRECORDS (See back of Copy B.) Wages, tips, other comp. 45687.15 Social security wages 11868.30 Medicare wages and tips 11868.30 Medicare wages and tips 11868.30 International Statement International International Internation I	41-085; OMB No. 11 2 Federal income tax with 4 Social security tax with 6 Medicare tax withheld	ww.irs.gov/efile	Copy 2 – To Be Filed W City, or Local Income T a Employee's soc. sec. no. 712-96-8466 b Employer ID number (EIN) 46-4381195 c Employer's name, address, a Impact Outsourcing 300 WILSON RD B GRIFFIN, GA 3022 d Control number e Employee's name, address, SPANDANA VOTT 13838 THE LAKES Pflugerville, TX 786 7 Social security tips 0.	/ith Emplo fax Return 1 Wages, 3 Social s 5 Medica and ZIP code 3 Solution 3LDG 800 24 and ZIP code EM BLVD A 60 00	pyee's State, tips, other comp. 45687.15 security wages 11868.30 re wages and tips 11868.30 ns IX LLC b e PT 9209 llocated tips 0.00	OMI 2 Federal income t 4 Social security ta 6 Medicare tax with	41-0852411 B No. 1545-0008 tax withheld 5108.7 x withheld 735.8 hheld 172.0
s information is being furnished opy C – For EMPLOYEI otice to Employee on the Employee's soc. sec. no. 712-96-8466 Employer ID number (EIN) 46-4381195 Employer's name, address, and Impact Outsourcing F 300 WILSON RD BL GRIFFIN, GA 30224 Control number Employee's name, address, an SPANDANA VOTTE 13838 THE LAKES E Pflugerville, TX 7866 Social security tips 0.00 Dependent care benefits	t to the Internal Revenue Service. SRECORDS (See back of Copy B.) Wages, tips, other comp. 45687.15 Social security wages Nedicare wages and tips 11868.30 Medicare wages and tips 11868.30 ZIP code Solutions IX LLC DG 800 d ZIP code M SLVD APT 9209 0	9 9 41-086: OMB No. 1: 4 Social security tax with 6 Medicare tax withheld 9 12a Code See inst. for	ww.irs.gov/efile	Copy 2 – To Be Filed W City, or Local Income T a Employee's soc. sec. no. 712-96-8466 b Employer ID number (EIN) 46-4381195 c Employer's name, address, a Impact Outsourcing 300 WILSON RD B GRIFFIN, GA 3022 d Control number e Employee's name, address, SPANDANA VOTT 13838 THE LAKES Pflugerville, TX 786 7 Social security tips 0.	/ith Emplo fax Return 1 Wages, 3 Social 6 5 Medica and ZIP code g Solution BLDG 800 4 and ZIP code EM BLVD A 60 8 A 00	pyee's State, tips, other comp. 45687.15 security wages 11868.30 re wages and tips 11868.30 ns IX LLC b e PT 9209 llocated tips 0.00	OMI Federal income t Social security ta 6 Medicare tax with	41-0852411 B No. 1545-0008 tax withheld 5108.7 ix withheld 735.8 hheld 172.0
s information is being furnished opy C – For EMPLOYEI otice to Employee on the imployee's soc. sec. no. 712-96-8466 imployer ID number (EIN) 46-4381195 imployer's name, address, and Impact Outsourcing F 300 WILSON RD BL GRIFFIN, GA 30224 imployee's name, address, and SPANDANA VOTTE 13838 THE LAKES E Pflugerville, TX 7866 iocial security tips 0.00 Dependent care benefits Statutory employee 14 etirement plan	t to the Internal Revenue Service. SRECORDS (See back of Copy B.) Wages, tips, other comp. 45687.15 Social security wages Nedicare wages and tips 11868.30 Medicare wages and tips 11868.30 ZIP code Solutions IX LLC DG 800 d ZIP code M SLVD APT 9209 0	41-085 OMB No. 11 45 Social security tax withing 6 Medicare tax withheld 16 Medicare tax withheld 12 Code 12 Code	ww.irs.gov/efile	Copy 2 - To Be Filed W City, or Local Income T a Employee's soc. sec. no. 712-96-8466 b Employer ID number (EIN) 46-4381195 c Employer's name, address, a Impact Outsourcing 300 WILSON RD B GRIFFIN, GA 3022 d Control number e Employee's name, address, SPANDANA VOTT 13838 THE LAKES Pflugerville, TX 786 7 Social security tips 0. 10 Dependent care benefits 13 Statutory employee Retirement plan	/ith Emplo fax Return 1 Wages, 3 Social 6 5 Medica and ZIP code g Solution BLDG 800 4 and ZIP code EM BLVD A 60 8 A 00	pyee's State, tips, other comp. 45687.15 security wages 11868.30 re wages and tips 11868.30 ns IX LLC b e PT 9209 llocated tips 0.00	OMI Federal income t A Social security ta 6 Medicare tax with 12 a Code 12b Code 12c Code	41-0852411 B No. 1545-0008 tax withheld 5108.7 ix withheld 735.8 hheld 172.0
s information is being furnished opy C - For EMPLOYEI btice to Employee on the imployee's soc. sec. no. 712-96-8466 imployer ID number (EIN) 16-4381195 imployer's name, address, and Impact Outsourcing - 300 WILSON RD BL GRIFFIN, GA 30224 iontrol number imployee's name, address, an SPANDANA VOTTE 13838 THE LAKES E Pflugerville, TX 7866 iocial security tips 0.00 Dependent care benefits Statutory employee 14 etirement plan	t to the Internal Revenue Service. SRECORDS (See back of Copy B.) Wages, tips, other comp. 45687.15 Social security wages Nedicare wages and tips 11868.30 Medicare wages and tips 11868.30 ZIP code Solutions IX LLC DG 800 d ZIP code M SLVD APT 9209 0	9 9 12a Code See inst. for 12b Code	ww.irs.gov/efile	Copy 2 - To Be Filed W City, or Local Income T a Employee's soc. sec. no. 712-96-8466 b Employer ID number (EIN) 46-4381195 c Employer's name, address, a Impact Outsourcing 300 WILSON RD B GRIFFIN, GA 3022 d Control number e Employee's name, address, SPANDANA VOTT 13838 THE LAKES Pflugerville, TX 786 7 Social security tips 0. 10 Dependent care benefits 13 Statutory employee	/ith Emplo fax Return 1 Wages, 3 Social 6 5 Medica and ZIP code g Solution BLDG 800 4 and ZIP code EM BLVD A 60 8 A 00	pyee's State, tips, other comp. 45687.15 security wages 11868.30 re wages and tips 11868.30 ns IX LLC b e PT 9209 llocated tips 0.00	9 2 Federal income 1 4 Social security ta 6 Medicare tax with 1 and a security ta 1 an	41-0852411 B No. 1545-0008 tax withheld 5108.7 ix withheld 735.8 hheld 172.0
s information is being furnished opy C – For EMPLOYEI otice to Employee on the imployee's soc. sec. no. 712-96-8466 imployer ID number (EIN) 46-4381195 imployer's name, address, and Impact Outsourcing F 300 WILSON RD BL GRIFFIN, GA 30224 imployee's name, address, and SPANDANA VOTTE 13838 THE LAKES E Pflugerville, TX 7866 iocial security tips 0.00 Dependent care benefits Statutory employee 14 etirement plan	t to the Internal Revenue Service. SRECORDS (See back of Copy B.) Wages, tips, other comp. 45687.15 Social security wages Nedicare wages and tips 11868.30 Medicare wages and tips 11868.30 ZIP code Solutions IX LLC DG 800 d ZIP code M SLVD APT 9209 0	41-085 OMB No. 11 45 Social security tax withing 6 Medicare tax withheld 16 Medicare tax withheld 12 Code 12 Code	ww.irs.gov/efile	Copy 2 - To Be Filed W City, or Local Income T a Employee's soc. sec. no. 712-96-8466 b Employer ID number (EIN) 46-4381195 c Employer's name, address, a Impact Outsourcing 300 WILSON RD B GRIFFIN, GA 3022 d Control number e Employee's name, address, SPANDANA VOTT 13838 THE LAKES Pflugerville, TX 786 7 Social security tips 0. 10 Dependent care benefits 13 Statutory employee Retirement plan	/ith Emplo fax Return 1 Wages, 3 Social 6 5 Medica and ZIP code g Solution BLDG 800 4 and ZIP code EM BLVD A 60 8 A 00	pyee's State, tips, other comp. 45687.15 security wages 11868.30 re wages and tips 11868.30 ns IX LLC b e PT 9209 llocated tips 0.00	OMI Federal income t A Social security ta 6 Medicare tax with 12 a Code 12b Code 12c Code	41-0852411 B No. 1545-0008 tax withheld 5108.7 ix withheld 735.8 hheld 172.0
s information is being furnished opy C – For EMPLOYEI otice to Employee on the Employee's soc. sec. no. 712-96-8466 Employer ID number (EIN) 46-4381195 Employer's name, address, and Impact Outsourcing i 300 WILSON RD BL GRIFFIN, GA 30224 Control number Employee's name, address, and SPANDANA VOTTE 13838 THE LAKES E Pflugerville, TX 7866 Social security tips 0.00 Dependent care benefits Statutory employee teirement plan hird-party sick pay State Employer's state LD. nu	to the Internal Revenue Service. SRECORDS (See back of Copy B.) Wages, tips, other comp. 45687.15 Social security wages Nedicare wages and tips 11868.30 Medicare wages and tips 11868.30 ZIP code Solutions IX LLC DG 800 ZIP code M SLVD APT 9209 0 Solutions Code Solutions So	9 9 12c Code 12c Code 12c Code 12d Code 17 State income tax	ww.irs.gov/efile	Copy 2 – To Be Filed W City, or Local Income T a Employee's soc. sec. no. 712-96-8466 b Employer ID number (EIN) 46-4381195 c Employer's name, address, a Impact Outsourcing 300 WILSON RD B GRIFFIN, GA 3022 d Control number e Employee's name, address, SPANDANA VOTT 13838 THE LAKES Pflugerville, TX 786 7 Social security tips 0. 10 Dependent care benefits 13 Statutory employee Retirement plan Third-party sick pay	Vith Emplo Tax Return 1 Wages, 3 Social 6 5 Medica and ZIP code 9 Solution 8LDG 800 44 and ZIP code 60 8 Al 00 11 N 14 Other	pyee's State, tips, other comp. 45687.15 security wages 11868.30 re wages and tips 11868.30 ns IX LLC 0 e PT 9209 Nonqualified plans 16 State wages, tips, etc.	9 9 12a Code 12b Code 12c Code 12d Code 17 State inco	B No. 1545-0008 tax withheld 5108.7 ix withheld 735.8 nheld 172.0 S
s information is being furnished opy C - For EMPLOYEI otice to Employee on the mployee's soc. sec. no. 712-96-8466 mployer ID number (EIN) 46-4381195 mployer's name, address, and Impact Outsourcing 3 00 WILSON RD BL GRIFFIN, GA 30224 control number mployee's name, address, an SPANDANA VOTTE 13838 THE LAKES E Pflugerville, TX 7866 focial security tips 0.00 Dependent care benefits Statutory employee 14 etirement plan nird-party sick pay	t to the Internal Revenue Service. SRECORDS (See back of Copy B.) Wages, tips, other comp. 45687.15 Social security wages 11868.30 Medicare wages and tips 11868.30 Medicare wages and tips 11868.30 Anticode CIP code CI	9 12a Code 12b Code 12c Code 12d Code	ww.irs.gov/efile	Copy 2 – To Be Filed W City, or Local Income T a Employee's soc. sec. no. 712-96-8466 b Employer ID number (EIN) 46-4381195 c Employer's name, address, a Impact Outsourcing 300 WILSON RD B GRIFFIN, GA 3022 d Control number e Employee's name, address, SPANDANA VOTT 13838 THE LAKES Pflugerville, TX 786 7 Social security tips 0. 10 Dependent care benefits 13 Statutory employee Retirement plan Third-party sick pay	Vith Emplo Tax Return 1 Wages, 3 Social 6 5 Medica and ZIP code 9 Solution 8LDG 800 44 and ZIP code 60 8 Al 00 11 N 14 Other	e PT 9209 Ilocated tips 0.00 Nonqualified plans	9 9 12a Code 12b Code 12c Code 12d Code	41-0852411 B No. 1545-0008 tax withheld 5108.7 ix withheld 735.8 nheid 172.0

I

Notice to Employee

Do you have to file? Refer to the Instructions for Forms 1040 and 1040-SR to determine if you are required to file a tax return. Even if you don't have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit

Earned income credit (EIC). You may be able to take the EIC for 2021 if your adjusted gross income (AGI) is less than a certain amount of the credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EIC if your investment income is more than the specified amount for 2021 or if income is earned for services provided while you were an inmate at a penal institution. For 2021 income limits and more information, visit www.irs.gov/EITC. Also see Pub. 596, Earned Income Credit. Any EIC that is more than your tax liability is refunded to you, but only if you file a tax return.

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517, Social Security and Other Information for Members of the Clergy and Religious Workers.

Corrections, If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Forent Copies 0, and 2 and ask your employer to context your employment record. Be sure to ask the employer to file Forent W-2c, Corrected Wage and Tax Statement, with the Social Security Administration (SSA) to correct any name, SSN, or money amount error reported to the SSA on Form W-2c. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You also may visit the SSA website at www.SSA.gov.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in box 12, using code DD, of the cost of employer-sponsored health coverage is for your information only. The amount reported with code DD

Credit for excess taxes. If you had more than one employer in 2021 and more than \$8,853.60 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. If you had more than one railroad employer and more than \$5,203.80 in Tier 2 RRTA tax was withheld, you also may be able to claim a credit. See the Instructions for Forms 1040 and 1040-SR and Pub. SoG, Tax Withholding and Estimated Tax.

(Also see Instructions for Employee, below.)

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return. Box 2. Enter this amount on the federal income tax withheld line of

your tax return. Box 5 You may be required to report this amount on Form 8959, Additional Medicare Tax. See the Instructions for Forms 1040 and 1040-SR to determine if you are required to complete Form 8959. Box 6 This amount includes the 1.45% Medicare Tax withheld on all Medicare vages and tips shown in box 5, as well as the 0.9%. Additional Medicare Tax on any of those Medicare wages and tips above \$200 most.

Additional Medicate r as on ..., above \$200,000. Box 8. This amount is **not** included in box 1, 3, 5, or 7. For information on how to report tips on your tax return, see the Instructions for Forms 1040 and 1040-SR.

You must file Form 4137, Social Security and Medicare Tax on Unreported Tp Income, with your income tax return to report at least the allocated by amount unless you can prove with adequate records that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax owed on tips you dini/r toport to your employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security tips will be certified to your social security record (used to figure your benefits).

Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over \$5,000 also is included in box 1. Complete Form 2441, Child and Dependent Care Expenses, to compute any taxable and nontaxat

Box 11. This amount is (a) reported in box 1 if it is a distribution made to you from a population of population or population of population nade to you from a nonqualified deferred compensation or nongov-ernmental section 457(b) plan or (b) included in box 3 and/or 5 if it is a prior year deferral under a nongualified or section 457(b) plan that became taxable for Social Security and Medicare taxes this year became trixable for Societ Security and Medicare taxes the year became threat is no longia 3 security and Medicare taxes they our right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be aged 62 by the end of the calendar year, and you are or will be aged 62 by the end of the calendar year, your employer should file from SSA-131, Employer Report of Special Wage Payments, with the Social Scurity Administration and year you

Box 12. The following list explains the codes shown in box 12. You Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax terum. Elective deferrats (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of \$19,500 (\$13,500 (\$13,500) you only have SiMPLE plans; \$22,500 for section 403(b) plans if you quality for the 15-year unle explained in Pub. 571). Deferrals under code G are limited to \$19,500. Deferrals under code H are limited to \$19,500.

However, if you were at least age 50 in 2021, your employer n have allowed an additional deferral of up to \$6,500 (\$3,000 for nployer may have allowed an additional deferral of up to \$6,500 (\$3,000 for section 401 (%(11) and 406(5) SMUPE Janas). This additional deferral amount is not subject to the overall limit on elective deferrals. For code G the limit on elective deferrals may be higher for the last 3 years before you reach retirement age. Contact your plan administrator for more information. Amounts in excess of the instructions elective deferral limit must be included in income. See the instructions for Forms 1040 and 1040-SR

Note, If a year follows code D through H. S. Y. AA, BB, or EE, you Note: In a year hourse code of anough n, or, 1, AA, best, of EE, you were in military service. To figure whether you made excess deferrais, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.

A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040 or 1040-SR. See the instructions for Forms 1040 and uctions for Forms 1040 and on Form 1040-SR

B—Uncollected Medicare tax on tips. Include this tax on Form 1040 or 1040-SR. See the Instructions for Forms 1040 and 1040-SR. or 1040-SR. See the Instructions for Forms 1040 and 1040-SR. C—Taxable cost of group-term life insurance over \$50,000 (included in boxes 1, 3 (µb to the social security wage base), and 5) D—Elective deferrails to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) parangement. E—Elective deferrals under a section 403(b) salary reduction arrangement.

agreement. F—Elective deferrals under a section 408(k)(6) salary reduction SEP. G-Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation

Handboord Carriers of State (1)(18)(D) tax-exempt organization plan. See the Instructions for Forms 1040 and 1040-SR for how to deduct. J—Nontaxable sick pay (information only, not included in box 1, 3, or

K—20% excise tax on excess golden parachute payments. See the

Instructions for Forms 1040 and 1040-SR.

L-Substantiated employee business expense reimbursements

L—Substantiated emproyee usings expanse united (incritatable) (inc

Instructions for Forms 1040 and 1040-SR. P—Excludable moving exponse reimbursements paid directly to a member of the U.S. Armed Forces (not included in box 1, 3, or 5). Q—Nontaxable combat pay. See the Instructions for Forms 1040 and 1040-SR for details on reporting this amount. R—Employer contributions to your Archer MSA. Report on Form 8833. Archer MSAs and Long-Term Carel Insurance Contracts. S—Employee salary reduction contributions under a section 408(p) SIMPLE pain (not included in box 1). C—Adoption benefits (not included in box 1). Complete Form 8839.

Qualified Adoption Expenses, to compute any taxable and nontaxable amounts

V—Income from exercise of nonstatutory stock option(s)

(included in boxes 1, 3 (up to social security wage base), and 5). See Pub. 525, Taxable and Nontaxable Income, for reporting requirements

requirements. W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to y health savings account. Report on Form 8889, Health Saving heaven to (USC) alth savings account. Report on Form 8889, Health Sa counts (HSAs). -Deferrals under a section 409A nonqualified deferred Y-Defe

compensation plan

compensation plan. Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount also is included in box 1. It is subject to an additional 20% tax plus interest. See the instructions for Forms 1040 and 1040-SR. AA—Designated Roth contributions under a section 401(k) plan. BB—Designated Roth contributions under a section 403(k) plan. DB—Cost of employer-sponsored health coverage. The amount reported with code DD is not taxable. EE—Designated Roth contributions under a governmental section 457(b) plan Tis amount does not analy to contributions under a

457(b) plan. FF—Permitted benefits under a qualified small employer health

reimbursement arrangement. GG—Income from qualified equity grants under section 83(i). HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year. Box 13. If the Reitement plan^{*} box is checked, special limits may

apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A, Contributions to Individual Retirement ents (IRAs).

Arrangements (IRAs). Box 14. Empoyees may use this box to report information such as state disability insurance prevailments deducted, nontaxable income, educational assistance payments, or a member of the ciergy's parsonage allowance and utilities. Railroad employers use this box to report railroad relitement (IRRTA) compensation. Tier 1 tax. Tier 2 tax. Medicare tax and Additional Medicare Tax. Includ ported by the employee to the employer in railroad retirement tips reported by the en (RRTA) compensation

Included in Box 14, if applicable, are amounts paid to you as qualified sick leave wages or qualified family leave wages under the Families First Coronavirus Response Act. Specifically, up to six types of paid qualified sick leave wages or qualified family leave wages may be reported in Box 14:

ick leave wages subject to the \$511 per day limit paid for leave ken after December 31, 2020, and before April 1, 2021, because taken after December 31, 2004, and of care you required; -Sick leave wages subject to the \$200 per day limit paid for leave taken after December 31, 2020, and before April 1, 2021, because

of care you provided to another: -Emregnery family leave wages paid for leave taken after December 31, 2020, and before April 1, 2021; -Sick leave wages subject to the \$511 per day limit paid for leave taken after March 31, 2021, and before October 1, 2021, because of care you required; -Sick leave wages subject to the \$200 per day limit paid for leave

Sick leave wages subject to the \$200 per day limit paid for leave taken after March 31, 2021, and before October 1, 2021, because

Grare you provided to another; and
 Emergency family leave wages paid for leave taken after March 31, 2021, and before October 1, 2021.

If you have self-employment income in addition to wages paid by your employer, and you indrat to claim any qualified sick leave or qualified family leave equivalent credits, you must report the qualified sick leave or qualified milly leave vages on form 7202. *Credits for Sick Leave and Family Leave for Certain Self-Employed Individuss*, included with your income tax return, and may have to reduce (but not below zero) any qualified sick leave or qualified family leave equivalent credits by the amount of these qualified leave wages. If you have self-employment income, you should refer to the instructions for your individual income tax return for more information.

Note: Keep Copy C of Form W-2 for at least 3 years after the du date for filing your income tax return. However, to help protect your social security benefits, keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.