



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

**d** Control number 000178 ATLA/L49 Dept. ATLA/L49 Corp. T Employer use only 107

**c** Employer's name, address, and ZIP code  
**STELLAR IT SOLUTIONS LLC**  
 812 STATE ROAD SUITE 230  
 PRINCETON NJ 08540  
 Batch #04456

**e/f** Employee's name, address, and ZIP code  
**SUMAN GOUD UDUTHALA**  
 301 NORTH BEAUREGARD STREET  
 ALEXANDRIA VA 22312

**b** Employer's FED ID number 83-2698201  
**a** Employee's SSA number XXX-XX-7532

**1** Wages, tips, other comp. 30600.00  
**2** Federal income tax withheld 4724.18

**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 VA Employer's state ID no. 30832698201F001  
**16** State wages, tips, etc. 30600.00

**17** State income tax 1609.00  
**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	VA. State Wages, Tips, Etc. Box 16 of W-2
Gross Pay	30,600.00	30,600.00	30,600.00	30,600.00
Less Exempt Wages	N/A	30,600.00	30,600.00	N/A
<b>Reported W-2 Wages</b>	<b>30,600.00</b>	<b>0.00</b>	<b>0.00</b>	<b>30,600.00</b>

2. Employee Name and Address.

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**ALEXANDRIA VA 22312**

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Federal Filing Copy  
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