4				La de part	[
OMB No. 1546-0008 d Control Number	1 Wages, tips, other compensation 6780.00	2 Federal income tax withheld	OMB No. 1645-0008 d Control Number	1 Wages, tips, other compensation 6780.00	2 Federal income tax withheld	
b Employer identification number (EIN) 02-0579190	6780.00	4 Social security tax withheld 420.36	b Employer identification number 02 - 0579190	6780.00	4 Social security tax withheld 420.36	
a Employee's social security number XXX - XX - 1327	5 Medicare wages and tips 6780.00	6 Medicare tax withheld 98.31	a Employee's social security nu XXX - XX - 1327	6780.00	6 Medicare tax withheld 98.31	
OASIS OUTSOURCING ADMIN II, LLC OAS 2054 VISTA PARKWAY STE 300 205				c Employer's name, address and ZIP code OASIS OUTSOURCING ADMIN II, LLC 2054 VISTA PARKWAY STE 300 WEST PALM BEACH FL 33411		
7 Social security tips	8 Allocated tips		7 Social security tips	8 Allocated tips	Some statement of the control of the	
10 Dependent care benefits	11 Nonqualified plans	12a 8	10 Dependent care benefits	11 Nonqualified plans	12a	
12b 8	12c	12d See instructions for box 12	126 8	12c 8	12d See instructions for box 12	
13 Satutory Retirement Third-party sick pay • Employee's name, address and ZIP cor PRAVALLIKA DEREDDY			13 Statutory employee Retirement Tremployee Plan Plan Plan Plan Plan Plan Plan Plan			
202 CONGRESSIONAL CIR LITTLE ROCK AR 72210 202 CONGRESSIONAL CIR LITTLE ROCK AR 72210						
2021 AR 659	ne's state LD. no. 15758 - WHW	16 State weges, tips, etc. 6780.00	2021 AR AR	te Employer's state I.D. no. 65915758 - WHW	16 State wages, tips, etc. 6780.00	
Wage and Tax Statement Copy C - For EMPLOYEE'S		ocal wages, tips, etc.	Wage and Tax Statement Copy B - To Be Filed With		Local wages, tips, etc.	
RECORDS (See Notice to Employee on back of Copy B.)	87.34		Employee's FEDERAL Ta Return.	ax		
This information is being furnished to the Internal Reversus Service If you are required to file a tax return, a negligence penalty or other sanction may be imposed on you if this	19 Local income tax 20 L	Locality name	This information is being furnished to Internal Revenue Service	19 Local income tax 20	Locality name	
income is tauable and you fail to report a Department of the Treesury – Internal Revenue Service			Department of the Treasury – Internal Revenue Service			
OMB No. 1545-0008		2 Federal income tax withheld	OMB No. 1545-0008	1 Wages, tips, other compensation	2 Federal income tax withheld	
d Control Number	6780.00	4 Social security tax withheld	b Employer identification number	6780.00	4 Social security tax withheld	
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a Employee's social security number XXX - XX - 1327	5 Medicare wages and tips 6780.00	98.31	XXX-XX-1327	6780.00	98.31	
c Employer's name, address and ZIP code OASIS OUTSOURCING ADMIN II, LLC 2054 VISTA PARKWAY STE 300 WEST PALM BEACH FL 33411 C Employer's name, address and ZIP code OASIS OUTSOURCING ADMIN II, LLC 2054 VISTA PARKWAY STE 300 WEST PALM BEACH FL 33411						
7 Social security tips	8 Allocated tips	9	7 Social security tips	8 Allocated tips	Secretary of the secret	
10 Dependent care benefits	11 Nonqualified plans	124	10 Dependent care benefits	11 Nonqualified plans	12a 8	
12b	12c	3 12d	12b	12c 8	12d 8	
13 Statutiony Retirement Third-party sick pay	14 Other		employée plan s	ird-party 14 Other		
e Employee's name, address and ZIP co PRAVALLIKA DEREDDY 202 CONGRESSIONAL C LITTLE ROCK AR 7221	rir		Employee's name, address an PRAVALLIKA DERE 202 CONGRESSION LITTLE ROCK AR	EDDY NAL CIR		
	rer's state LD. no. 15758 – WHW	16 State wages, tips, etc. 6780.00		e Employer's state I.D. no. 65915758 - WHW	16 State wages, tips, etc. 6780.00	
[W-2			§ W-2			
Wage and Tax Statement Copy 2 - To Be Filed With Employee's State, City, or Copy 3 - To Be Filed With Employee's State, City, or Copy 3 - To Be Filed With Employee's State, City, or Copy 3 - To Be Filed With Employee's State, City, or Copy 3 - To Be Filed With Employee's State, City, or Copy 3 - To Be Filed With Employee's State, City, or Copy 3 - To Be Filed With Employee's State, City, or Copy 4 - To Be Filed With Employee's State, City, or Copy 5 - To Be Filed With Employee's State, City, or Copy 6 - To Be Filed With Employee's State, City, or Copy 7 - To Be Filed With Employee's State, City, or Copy 8 -						
Local Income Tax Return.	19 Local income tax 20 L	ocality name	l I		Locality name	
Department of the Treasory - internal Revenue Service		***************************************	Department of the Treasury - internal Revenue Service			
Internal Revenue Service						