



Employee Reference Copy <b>W-2</b> Wage and Tax Statement Copy C for employee's records.		2020 OMB No. 1545-0008	
d Control number 000012 RZ/J7J	Dept.	Corp.	Employer use only 9
c Employer's name, address, and ZIP code <b>DSBRIDGE CORP</b> 4390 US1 SUITE 211 PRINCETON, NJ 08540  Batch #91365			
e/f Employee's name, address, and ZIP code <b>PHANI KARTHEEK KOLLIPARA</b> 376 SIP AVENUE APT 3 JERSEY CITY, NJ 07306			
b Employer's FED ID number 27-2349054	a Employee's SSA number XXX-XX-9797		
1 Wages, tips, other comp. 29700.00	2 Federal income tax withheld 4903.89		
3 Social security wages 29700.00	4 Social security tax withheld 1841.40		
5 Medicare wages and tips 29700.00	6 Medicare tax withheld 430.65		
7 Social security tips	8 Allocated tips		
9	10 Dependent care benefits		
11 Nonqualified plans	12a See instructions for box 12		
14 Other 47.52 FLI 77.22 NJ DI 126.23 UI/WF/SWF	12b		
	12c		
	12d		
	13 Stat emp.	Ret. plan	3rd party sick pay
15 State NJ	Employer's state ID no. 272-349-054/000	16 State wages, tips, etc. 29700.00	
17 State income tax 1464.00		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	NJ. State Wages, Tips, Etc. Box 16 of W-2
Gross Pay	29,700.00	29,700.00	29,700.00	29,700.00
Reported W-2 Wages	29,700.00	29,700.00	29,700.00	29,700.00

2. Employee Name and Address.

**PHANI KARTHEEK KOLLIPARA**  
376 SIP AVENUE  
APT 3  
JERSEY CITY, NJ 07306

© 2020 ADP, Inc.

1 Wages, tips, other comp. 29700.00		2 Federal income tax withheld 4903.89	
3 Social security wages 29700.00		4 Social security tax withheld 1841.40	
5 Medicare wages and tips 29700.00		6 Medicare tax withheld 430.65	
d Control number 000012 RZ/J7J	Dept.	Corp.	Employer use only 9
c Employer's name, address, and ZIP code <b>DSBRIDGE CORP</b> 4390 US1 SUITE 211 PRINCETON, NJ 08540			
b Employer's FED ID number 27-2349054	a Employee's SSA number XXX-XX-9797		
7 Social security tips		8 Allocated tips	
9	10 Dependent care benefits		
11 Nonqualified plans		12a See instructions for box 12	
14 Other 47.52 FLI 77.22 NJ DI 126.23 UI/WF/SWF	12b		
	12c		
	12d		
	13 Stat emp.	Ret. plan	3rd party sick pay
e/f Employee's name, address and ZIP code <b>PHANI KARTHEEK KOLLIPARA</b> 376 SIP AVENUE APT 3 JERSEY CITY, NJ 07306			
15 State NJ	Employer's state ID no. 272-349-054/000	16 State wages, tips, etc. 29700.00	
17 State income tax 1464.00		18 Local wages, tips, etc.	
19 Local income tax		20 Locality name	
Federal Filing Copy <b>W-2</b> Wage and Tax Statement Copy B to be filed with employee's Federal Income Tax Return.		NJ.State Reference Copy <b>W-2</b> Wage and Tax Statement Copy 2 to be filed with employee's State Income Tax Return.	

1 Wages, tips, other comp. 29700.00		2 Federal income tax withheld 4903.89	
3 Social security wages 29700.00		4 Social security tax withheld 1841.40	
5 Medicare wages and tips 29700.00		6 Medicare tax withheld 430.65	
d Control number 000012 RZ/J7J	Dept.	Corp.	Employer use only 9
c Employer's name, address, and ZIP code <b>DSBRIDGE CORP</b> 4390 US1 SUITE 211 PRINCETON, NJ 08540			
b Employer's FED ID number 27-2349054	a Employee's SSA number XXX-XX-9797		
7 Social security tips		8 Allocated tips	
9	10 Dependent care benefits		
11 Nonqualified plans		12a	
14 Other 47.52 FLI 77.22 NJ DI 126.23 UI/WF/SWF	12b		
	12c		
	12d		
	13 Stat emp.	Ret. plan	3rd party sick pay
e/f Employee's name, address and ZIP code <b>PHANI KARTHEEK KOLLIPARA</b> 376 SIP AVENUE APT 3 JERSEY CITY, NJ 07306			
15 State NJ	Employer's state ID no. 272-349-054/000	16 State wages, tips, etc. 29700.00	
17 State income tax 1464.00		18 Local wages, tips, etc.	
19 Local income tax		20 Locality name	
NJ.State Filing Copy <b>W-2</b> Wage and Tax Statement Copy 2 to be filed with employee's State Income Tax Return.		NJ.State Reference Copy <b>W-2</b> Wage and Tax Statement Copy 2 to be filed with employee's State Income Tax Return.	

1 Wages, tips, other comp. 29700.00		2 Federal income tax withheld 4903.89	
3 Social security wages 29700.00		4 Social security tax withheld 1841.40	
5 Medicare wages and tips 29700.00		6 Medicare tax withheld 430.65	
d Control number 000012 RZ/J7J	Dept.	Corp.	Employer use only 9
c Employer's name, address, and ZIP code <b>DSBRIDGE CORP</b> 4390 US1 SUITE 211 PRINCETON, NJ 08540			
b Employer's FED ID number 27-2349054	a Employee's SSA number XXX-XX-9797		
7 Social security tips		8 Allocated tips	
9	10 Dependent care benefits		
11 Nonqualified plans		12a	
14 Other 47.52 FLI 77.22 NJ DI 126.23 UI/WF/SWF	12b		
	12c		
	12d		
	13 Stat emp.	Ret. plan	3rd party sick pay
e/f Employee's name, address and ZIP code <b>PHANI KARTHEEK KOLLIPARA</b> 376 SIP AVENUE APT 3 JERSEY CITY, NJ 07306			
15 State NJ	Employer's state ID no. 272-349-054/000	16 State wages, tips, etc. 29700.00	
17 State income tax 1464.00		18 Local wages, tips, etc.	
19 Local income tax		20 Locality name	
NJ.State Filing Copy <b>W-2</b> Wage and Tax Statement Copy 2 to be filed with employee's State Income Tax Return.		NJ.State Filing Copy <b>W-2</b> Wage and Tax Statement Copy 2 to be filed with employee's State Income Tax Return.	