2020 W-2 and EARNINGS SUMMARY



Employee Reference W-2 Wage and Tax Statement Copy C for employee's records.

Copy C for employee's Dept. Corp. Employer use only A

Employer's name, address, and ZIP code ORRBA SYSTEMS LLC 452 LAKESHORE PARKWAY STE 208 ROCK HILL, SC 29730

Batch #93052

Federal income tax withheld

938.16

e/f Employee's name, address, and ZIP code

NAVEEN KATAM 9425 HARTINGTON PL CHARLOTTE, NC 28269

Wages, tips, other comp

12500.00

b	Employer's FED ID number 83-3519424	а	Emplo			number (-2525
1	Wages, tips, other comp.	2	Feder	al	income	tax withheld
	12500.00					938.16
3	Social security wages	4	Socia	Is	ecurity	tax withheld
5	Medicare wages and tips	6	Medic	are	e tax wi	thheld
7	Social security tips	8	Alloca	ate	d tips	
9		10	Depen	de	nt care	benefits
11	Nonqualified plans			str	uctionsfo	r box 12
14	Other)	<u> </u>		
	Other	120				
		120		<u>Ц</u>		
		13	Stat er	np	Ret. plan	3rd party sick pa
15	State Employer's state ID no.	16	State	wa	iges, tip	s, etc.
17	State income tax	18	Local	W	ages, tip	s, etc.
19	Local income tax	20	Locali	ity	name	

Social security wages Social security tax withheld Medicare wages and tips 6 Medicare tax withheld d Control number Employer use only 000222 KG/ELK Employer's name, address, and ZIP code ORRBA SYSTEMS LLC 452 LAKESHORE PARKWAY STE 208 ROCK HILL, SC 29730 Employer's FED ID number 83-3519424 XXX-XX-2525 Social security tips Allocated tips 10 Dependent care benefits 11 Nonqualified plans 12a See instructions for box 12 14 Other 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

e/f Employee's name, address and ZIP code

NAVEEN KATAM 9425 HARTINGTON PL CHARLOTTE, NC 28269

Federal Filing Copy

Wage and Tax 2020
Statement OMB No. 1545-0008

Copy B to be filed with employee's Federal Income Tax Return.

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 Wages Wages Wages Box 1 of W-2 Box 3 of W-2 Box 5 of W-2

Gross Pay 12,500.00 12,500.00 12,500.00 Reported W-2 Wages 12,500.00 0.00 0.00

2. Employee Name and Address.

NAVEEN KATAM 9425 HARTINGTON PL CHARLOTTE, NC 28269

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1 Wages, tips, oth	er comp. 2500.00	2 Federa	I income ta	x withheld 938.16
3 Social security	wages	4 Social	security ta	x withheld
5 Medicare wages	and tips	6 Medica	re tax with	held
d Control number	Dept.	Corp.	Employer	use only
000222 KG/E	LK		Α	
452 LAKE	e, address, ar YSTEMS LL SHORE PAR L, SC 29730	C RKWAY S		
b Employer's FED 83-3519	ID number 9424		ree's SSA XXX-XX-	
7 Social security	tips	8 Allocat	ed tips	
9		10 Depend	lent care b	enefits
11 Nonqualified pla	ins	12 a		
14 Other		12b		
		12c		
		12d		
		13 Stat emp	Ret. plan 3r	d party sick pay
e/f Employee's nan		4 7ID a1	\perp	
NAVEEN KA 9425 HARTIN CHARLOTTE,	TAM GTON P	L	-	
15 State Employer's	s state ID no.	16 State v	vages, tips,	etc.
17 State income tax	C	18 Local	wages, tips	, etc.
19 Local income ta	х	20 Localit	y name	
S	tate Refe	rence	Сору	

Statement

Copy 2 to be filed with employee's State Income Tax Return.

1	Wages, tips, other c	omp. 00.00	2 Feder	al income tax withheld 938.16
3	Social security wage	es	4 Socia	security tax withheld
5	Medicare wages and	d tips	6 Medic	are tax withheld
d	Control number 0222 KG/ELK	Dept.	Corp.	Employer use only
	452 LAKESHO ROCK HILL, S			STE 208
b	Employer's FED ID 83-351942			yee's SSA number XXX-XX-2525
b 7			a Emplo	XXX-XX-2525
	83-351942		8 Alloca	XXX-XX-2525
7	83-351942		8 Alloca	XXX-XX-2525 ated tips
7 9 11	83-351942 Social security tips		8 Alloca	XXX-XX-2525 ated tips
7 9 11	83-351942 Social security tips		8 Alloca 10 Depen	XXX-XX-2525 ated tips
7 9 11	83-351942 Social security tips		8 Alloca 10 Depen 12a	XXX-XX-2525 ated tips
7 9 11	83-351942 Social security tips		10 Depen 12a 12b 12c 12d	XXX-XX-2525 Ited tips Ident care benefits
7 9 11 14	83-351942 Social security tips	4	8 Alloca 10 Depen 12a 12b 12c 12d 13 States	XXX-XX-2525 Ited tips Ident care benefits

15 State Employer's state ID no. 16 State wages, tips, etc.

City or Local Reference

Wage and Tax

Statement

Copy 2 to be filed with employee's City or Local Income Tax Return

18 Local wages, tips, etc.

20 Locality name

17 State income tax

19 Local income tax