| Employee Ret W-2 Wage a Statem Copy C for employee'srecords. | | | |
|---|---|--|--|
| d Control number Dept. 000004 K7/AZ9 | Corp. Employer use only A 5 | | |
| c Employer's name, address, a CIBERLYNX INC 1200 W WALNU IRVING, TX 7503 | IT HILL LN STE 2275 | | |
| e/f Employee's name, address, a PADMAJAKSHI DALAVAI R/ 1347 MEADOW CREEK DR / IRVING, TX 75038 | AMACHANDRA | | |
| b Employer's FED ID number 81-4310365 | a Employee's SSA number XXX-XX-8404 | | |
| 1 Wages, tips, other comp. 97293.34 | 2 Federal income tax withheld | | |
| ³ Social security wages 97293.34 | 4 Social security tax withheld 6032.19 | | |
| 5 Medicare wages and tips 97293.34 | 6 Medicare tax withheld 1410.75 | | |
| 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 | | |
| | 13 Stat emp. Ret. plan 3rd party sick pa | | |
| 15 State Employer's state ID no | b. 16 State wages, tips, etc. | | |
| 17 State income tax | 18 Local wages, tips, etc. | | |
| 19 Local income tax | 20 Locality name | | |

2020 W-2 and EARNINGS SUMMARY

Medicare Wages Box 5 of W-2

97,293.34

97,293.34



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 |
|------------------------------|--|--|
| Gross Pay Reported W-2 Wages | 97,293.34 97,293.34 | 97,293.34 97,293.34 |

2. Employee Name and Address.

PADMAJAKSHI DALAVAI RAMACHANDRA 1347 MEADOW CREEK DR APT 165 IRVING, TX 75038

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| 1 Wages, tips, other comp. 97293.34 | 2 Federal income tax withheld 14925.99 | 1 Wages, tips, other comp. 97293.34 | 2 Federal income tax withheld 14925.99 | 1 Wages, tips, other comp. 97293.34 | 2 Federal income tax withheld 14925.99 |
|---|---|---|---|---|---|
| 3 Social security wages 97293.34 | 4 Social security tax withheld 6032.19 | 3 Social security wages 97293.34 | 4 Social security tax withheld 6032.19 | ³ Social security wages 97293.34 | 4 Social security tax withheld 6032.19 |
| 5 Medicare wages and tips 97293.34 | 6 Medicare tax withheld 1410.75 | 5 Medicare wages and tips 97293.34 | 6 Medicare tax withheld 1410.75 | 5 Medicare wages and tips 97293.34 | 6 Medicare tax withheld 1410.75 |
| d Control number Dept. | Corp. Employer use only | d Control number Dept. | Corp. Employer use only | d Control number Dept. | Corp. Employer use only |
| 000004 K7/AZ9 | A 5 | 000004 K7/AZ9 | A 5 | 000004 K7/AZ9 | A 5 |
| c Employer's name, address, a | nd ZIP code | c Employer's name, address, and ZIP code | | c Employer's name, address, and ZIP code | |
| CIBERLYNX INC 1200 W WALNU IRVING, TX 7503 | T HILL LN STE 2275 8 | CIBERLYNX INC 1200 W WALNUT HILL LN STE 2275 IRVING, TX 75038 | | CIBERLYNX INC 1200 W WALNUT HILL LN STE 2275 IRVING, TX 75038 | |
| b Employer's FED ID number 81-4310365 | a Employee's SSA number XXX-XX-8404 | b Employer's FED ID number 81-4310365 | a Employee's SSA number XXX-XX-8404 | b Employer's FED ID number 81-4310365 | a Employee's SSA number XXX-XX-8404 |
| 7 Social security tips | 8 Allocated tips | 7 Social security tips | 8 Allocated tips | 7 Social security tips | 8 Allocated tips |
| 9 | 10 Dependent care benefits | 9 | 10 Dependent care benefits | 9 | 10 Dependent care benefits |
| 11 Nonqualified plans | 12a See instructions for box 12 | 11 Nonqualified plans | 12a | 11 Nonqualified plans | 12a |
| 14 Other | 12b | 14 Other | 12b | 14 Other | 12b |
| | 12c | | 12c | | 12c |
| | 12d | | 12d | | 12d |
| | 13 Stat emp. Ret. plan 3rd party sick pay | | 13 Stat emp. Ret. plan 3rd party sick pay | | 13 Stat emp. Ret. plan 3rd party sick pa |
| e/f Employee's name, address an | d ZIP code | e/f Employee's name, address and ZIP code | | e/f Employee's name, address and ZIP code | |
| PADMAJAKSHI DALAVAI RA | MACHANDRA | PADMAJAKSHI DALAVAI RA | MACHANDRA | PADMAJAKSHI DALAVAI RAMACHANDRA | |
| 1347 MEADOW CREEK DR A | PT 165 | 1347 MEADOW CREEK DR APT 165 | | 1347 MEADOW CREEK DR APT 165 | |
| IRVING, TX 75038 | | IRVING, TX 75038 | | IRVING, TX 75038 | |
| 15 State Employer's state ID no. | 16 State wages, tips, etc. | 15 State Employer's state ID no | . 16 State wages, tips, etc. | 15 State Employer's state ID no | . 16 State wages, tips, etc. |
| 17 State income tax | 18 Local wages, tips, etc. | 17 State income tax | 18 Local wages, tips, etc. | 17 State income tax | 18 Local wages, tips, etc. |
| 19 Local income tax | 20 Locality name | 19 Local income tax | 20 Locality name | 19 Local income tax | 20 Locality name |
| Federal Fil | ing Copy | State Refe | erence Copy | City or Local | Reference Copy |
| W-2 Wage an Statemo Copy B to be filed with employee's Fe | nd Tax 2020 | W-2 Wage a Statemen | nd Tax 2020 | W-2 Wage a Statem Copy 2 to be filed with employee'sCity | nd Tax 2020 |