



<b>W-2</b>		Employee Reference Copy		<b>2020</b>	
Wage and Tax Statement		Statement		OMB No. 1545-0008	
Copy C for employee's records.					
d Control number	Dept.	Corp.	Employer use only		
000024	KG/BHM				
c Employer's name, address, and ZIP code					
ADDEPTO IT SOLUTIONS LLC 454 SOUTH ANDERSON ROAD SUITE 214 ROCK HILL, SC 29730					
Batch #93009					
e/f Employee's name, address, and ZIP code					
VINEETHA KONDA 10012 OLD PROVIDENCE WAY COCKEYSVILLE, MD 21030					
b Employer's FED ID number	a Employee's SSA number				
83-3389649	XXX-XX-0135				
1 Wages, tips, other comp.	2 Federal income tax withheld				
69733.86	9550.85				
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	Employer's state ID no.	16 State wages, tips, etc.			
	TOTAL STATE				
17 State income tax	18 Local wages, tips, etc.				
4785.55					
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	MD. State Wages, Tips, Etc. Box 16 of W-2
Gross Pay	69,733.86	69,733.86	69,733.86	38,639.42
Reported W-2 Wages	69,733.86	0.00	0.00	38,639.42

2. Employee Name and Address.

VINEETHA KONDA  
10012 OLD PROVIDENCE WAY  
COCKEYSVILLE, MD 21030

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1 Wages, tips, other comp.	2 Federal income tax withheld				
69733.86	9550.85				
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5 Medicare wages and tips	6 Medicare tax withheld				
d Control number	Dept.	Corp.	Employer use only		
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83-3389649	XXX-XX-0135				
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11 Nonqualified plans	12a See instructions for box 12				
14 Other	12b				
	12c				
	12d				
	13 Stat emp	Ret. plan	3rd party sick pay		
e/f Employee's name, address and ZIP code					
VINEETHA KONDA 10012 OLD PROVIDENCE WAY COCKEYSVILLE, MD 21030					
15 State	Employer's state ID no.	16 State wages, tips, etc.			
	TOTAL STATE				
17 State income tax	18 Local wages, tips, etc.				
4785.55					
19 Local income tax	20 Locality name				

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69733.86	9550.85				
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7 Social security tips	8 Allocated tips				
9	10 Dependent care benefits				
11 Nonqualified plans	12a				
14 Other	12b				
	12c				
	12d				
	13 Stat emp	Ret. plan	3rd party sick pay		
e/f Employee's name, address and ZIP code					
VINEETHA KONDA 10012 OLD PROVIDENCE WAY COCKEYSVILLE, MD 21030					
15 State	Employer's state ID no.	16 State wages, tips, etc.			
MD	1797654 9	38639.42			
17 State income tax	18 Local wages, tips, etc.				
2965.16					
19 Local income tax	20 Locality name				

1 Wages, tips, other comp.	2 Federal income tax withheld				
69733.86	9550.85				
3 Social security wages	4 Social security tax withheld				
5 Medicare wages and tips	6 Medicare tax withheld				
d Control number	Dept.	Corp.	Employer use only		
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c Employer's name, address, and ZIP code					
ADDEPTO IT SOLUTIONS LLC 454 SOUTH ANDERSON ROAD SUITE 214 ROCK HILL, SC 29730					
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83-3389649	XXX-XX-0135				
7 Social security tips	8 Allocated tips				
9	10 Dependent care benefits				
11 Nonqualified plans	12a				
14 Other	12b				
	12c				
	12d				
	13 Stat emp	Ret. plan	3rd party sick pay		
e/f Employee's name, address and ZIP code					
VINEETHA KONDA 10012 OLD PROVIDENCE WAY COCKEYSVILLE, MD 21030					
15 State	Employer's state ID no.	16 State wages, tips, etc.			
MD	1797654 9	38639.42			
17 State income tax	18 Local wages, tips, etc.				
2965.16					
19 Local income tax	20 Locality name				

Federal Filing Copy  
**W-2** Wage and Tax Statement **2020**  
Copy B to be filed with employee's Federal Income Tax Return.

MD.State Reference Copy  
**W-2** Wage and Tax Statement **2020**  
Copy 2 to be filed with employee's State Income Tax Return.

MD.State Filing Copy  
**W-2** Wage and Tax Statement **2020**  
Copy 2 to be filed with employee's State Income Tax Return.



SC.State Reference Copy  
**W-2** Wage and Tax Statement **2020**  
 Copy 2 to be filed with employee's State Income Tax Return. OMB No. 1545-0008

d Control number 000024	Dept. KG/BHM	Corp.	Employer use only
c Employer's name, address, and ZIP code <b>ADDEPTO IT SOLUTIONS LLC</b> <b>454 SOUTH ANDERSON ROAD</b> <b>SUITE 214</b> <b>ROCK HILL, SC 29730</b>  Batch #93009			
e/f Employee's name, address, and ZIP code <b>VINEETHA KONDA</b> <b>10012 OLD PROVIDENCE WAY</b> <b>COCKEYSVILLE, MD 21030</b>			
b Employer's FED ID number 83-3389649	a Employee's SSA number XXX-XX-0135		
1 Wages, tips, other comp. 69733.86	2 Federal income tax withheld 9550.85		
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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 SC	Employer's state ID no. 12010679 5	16 State wages, tips, etc. 31094.44	
17 State income tax 1820.39	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.

	SC. State Wages, Tips, Etc. Box 16 of W-2
Gross Pay	31,094.44
Reported W-2 Wages	31,094.44

2. Employee Name and Address.

**VINEETHA KONDA**  
**10012 OLD PROVIDENCE WAY**  
**COCKEYSVILLE, MD 21030**

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1 Wages, tips, other comp. 69733.86	2 Federal income tax withheld 9550.85		
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b Employer's FED ID number 83-3389649	a Employee's SSA number XXX-XX-0135		
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
e/f Employee's name, address and ZIP code <b>VINEETHA KONDA</b> <b>10012 OLD PROVIDENCE WAY</b> <b>COCKEYSVILLE, MD 21030</b>			
15 State SC	Employer's state ID no. 12010679 5	16 State wages, tips, etc. 31094.44	
17 State income tax 1820.39	18 Local wages, tips, etc.		
19 Local income tax	20 Locality name		

SC.State Filing Copy  
**W-2** Wage and Tax Statement **2020**  
 Copy 2 to be filed with employee's State Income Tax Return. OMB No. 1545-0008

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