2020 W-2 and EARNINGS SUMMARY



Employee Reference Wage and Tax Statement

Copy C for employee's records. d Control number KG/BHM

Corp. Employer use only

Employer's name, address, and ZIP code

ADDEPTO IT SOLUTIONS 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

Employer's FED ID number a Employee's SSA number XXX-XX-0135 83-3389649 Wages, tips, other comp. Federal income tax withheld 69733.86 9550.85 4 Social security tax withheld 3 Social security wages 5 Medicare wages and tips 6 Medicare tax withheld 8 Allocated tips 7 Social security tips 10 Dependent care benefits 11 Nonqualified plans 12a See instructions for box 12 14 Other 13 Stat emp Ret. plan 3rd party sick pa 15 State Employer's state ID no. 16 State wages, tips, etc. TOTAL STATE 18 Local wages, tips, etc. 17 State income tax

Wages, tips, other comp Federal income tax withheld 69733.86 9550.85 Social security wages Social security tax withheld Medicare wages and tips Medicare tax withheld d Control number Dept. Employer use only Corp. 000024 KG/BHM Employer's name, address, and ZIP code

20 Locality name

4785.55

19 Local income tax

ADDEPTO IT SOLUTIONS 454 SOUTH ANDERSON ROAD SUITE 214 ROCK HILL, SC 29730

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	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. TOTAL STATE	16 State wages, tips, etc.
17	State	income tax 4785.55	18 Local wages, tips, etc.
19	Local	income tax	20 Locality name
		Endoral Eili	na Conv

ederal Filing Wage and Tax Statement 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 Social Security Compensation Wages Box 1 of W-2

Wages Box 3 of W-2

Medicare MD. State Wages, Box 16 of W-2 Box 5 of W-2

Gross Pay Reported W-2 Wages

69,733.86 69,733.86

0.00

69,733.86

69,733.86 0.00

38,639.42 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 con 69733	2 Federal	ithheld 50.85		
3 Social security wages	4 Social	security tax w	ithheld	
5 Medicare wages and	6 Medica	re tax withheld	I	
d Control number	Dept.	Corp.	Emp l oyer us	se only
000024 KG/BHM				

Employer's name, address, and ZIP code ADDEPTO IT SOLUTIONS LLC 454 SOUTH ANDERSON

SUITE 214

ROCK HILL, SC 29730

b	Employer's FED ID number 83-3389649	a Emplo	yee's SS/		
7	Social security tips	8 Allocated tips			
9		10 Dependent care benefits			
11	Nonqualified plans	12a			
14	Other	12b			
		12c			
		12d			
		13 Stat em	p. Ret. plan	3rd party sick pay	
e/f	f Employee's name, address and ZIP code				

VINEETHA KONDA 10012 OLD PROVIDENCE WAY COCKEYSVILLE, MD 21030

15 Sta	te Employer's s 1797654 9	state ID no.	16	State	wages,	tips, etc. 38639.42
17 Sta	ate income tax		18	Local	wages,	tips, etc.
	29	965.16				
19 Lo	cal income tax		20	Local	ity nam	е
	MD Ct	oto Do	·fo	rone	$\overline{}$	CONV

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

1	1 Wages, tips, other comp. 69733.86			Federal	income tax withheld 9550.85	
3	3 Social security wages		4	Social	security tax withheld	
5	Medicare wages and tips		6	Medica	re tax withheld	
d	Control number	Dept.		Corp.	Employer use only	
00	00024 KG/BHM					
С	c Employer's name, address, and ZIP code					

ADDEPTO IT SOLUTIONS 454 SOUTH ANDERSON ROAD SUITE 214 ROCK HILL, SC 29730

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
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 stat 1797654 9	e ID no. 16	6 Stat	te wages, tips, etc. 38639.42
	17 State	income tax	18	B Loc	al wages, tips, etc.
l		296	5.16		
ĺ	19 Local	income tax	20	Loc	ality name
l					

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

2020 W-2 and EARNINGS SUMMARY

SC.State Reference Copy Wage and Tax Statement Copy 2 to be filed with employee's State Income Tax Return.

d Control number Dept. Corp. Empl Employer use only 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	Emplo	yer's FED ID nur 83=3389649	nber	а	Emplo				\ num (-013		
1	Wages	, tips, other con	ıp.	2	Feder	al	inco	ne	tax wi	thheld	l
		69733	3.86						955	50.85	5
3	Social	security wages		4	Socia	ls	ecuri	ty	tax wit	thheid	
5	Medica	are wages and ti	ps	6	Medic	are	e tax	wit	hheld		
7	Social	security tips		8	Alloca	ite	d tip	s			
9				10	Deper	nde	ent c	are	benefi	its	
11	Nonqu	alified plans		12a	See in	str 	uction	ıs fo	r box 1	2	
14	Other		-	12k							
٠.	Other		L	12c	:	_					
			-	12c		_					
				13	Stat er	np	Ret. p	olan	3rd par	ty sick	pay
	State SC	Employer's state 12010679 5	e ID no.	16	State	wa	ges,	tip	s, etc. 3109	94.44	1
17	17 State income tax 1820.39		.39	18	Local	W	ages,	tip	s, etc.	•	
19	Local	income tax		20	Local	ity	nam	е			

1 Wages, tips, other comp. 69733.86		2	Federa	I income tax withheld 9550.85	
3	3 Social security wages		4	Social	security tax withheld
5	5 Medicare wages and tips		6	Medica	re tax withheld
d	Control number	Dept.		Corp.	Employer use only
0.0	00024 KG/BHM				

c Employer's name, address, and ZIP code

ADDEPTO IT SOLUTIONS 454 SOUTH ANDERSON ROAD SUITE 214 ROCK HILL, SC 29730

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 ar	nd ZIP code

VINEETHA KONDA 10012 OLD PROVIDENCE WAY COCKEYSVILLE, MD 21030

15 State SC | Employer's state ID no. 16 State wages, tips, etc. 31094.44 18 Local wages, tips, etc. 1820.39 20 Locality name

SC.State Filing Copy Wage and Tax Statement Copy 2 to be filed with employee's State Income Tax Return. 1. Your Gross Pay was adjusted as follows to produce your W-2 Statement.

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.

SC. State Wages, Tips, Etc. Box 16 of W-2

Gross Pay

Reported W-2 Wages

31,094.44 31,094.44

2. Employee Name and Address.

VINEETHA KONDA 10012 OLD PROVIDENCE WAY COCKEYSVILLE, MD 21030

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