

Employee Reference Wage and Tax Statement Copy C for employee's records.
d Control number

Copy Employer use only

1	Control	number	Dept.	Corp.	
0 0	0054	KH/GMX	:		
:	Employ	er's name.	address.	and ZIP cod	de

PROWESS IT SOLUTIONS 2 BRIER HILL CT 2B BUILDING F EAST BRUNSWICK, NJ 08816

Batch #92710

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

SAI KUMAR CHITIKELA 10417 ECHO RIVER CT FOUNTAIN VALLEY, CA 92708

b	Employer's FED ID number 46-1223642			a Employee's SSA number XXX-XX-6542					
1	Wages	, tips, ot	her comp.	2	Feder	al	income	tax with	hheld
			69033.40					1046	1.24
3	Social	security	wages	4	Socia	l s	security	tax with	nheld
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	3
11	Nonqualified plans					str	uctionsfo	r box 12	
14	Other			121		<u> </u>			
	225.45 SDI		120		<u> </u>				
		46.95 MAPFML		120		<u> </u>			
				13	Stat er	np.	Ret. plan	3rd part	y sick pay
15	5 State Employer's state ID no. TOTAL STATE			. 16	State	wa	ages, tip	s, etc.	
17 State income tax 3370.17				18	Local	w	ages, tip	s, etc.	
19 Local income tax				20 Locality name					

Wages, tips, other comp 69033.40 10461.24 Social security wages Medicare wages and tips 6 Medicare tax withheld d Control number Employer use only 000054 KH/GMX Employer's name, address, and ZIP code

PROWESS IT SOLUTIONS LLC 2 BRIER HILL CT 2B BUILDING F EAST BRUNSWICK, NJ 08816

b	Employer's FED ID number 46-1223642	a Employee's SSA number XXX-XX-6542				
7	Social security tips	8 Allocated tips				
9		10 Dependent care benefits				
11	Nonqualified plans	12a See instructions for box 12				
14	Other	12b				
	225.45 SDI	12c				
	46.95 MAPFML	12d				
		13 Stat emp. Ret. plan 3rd party sick pay				
e/f Employee's name, address and ZIP code						

SAI KUMAR CHITIKELA

10417 ECHO RIVER CT **FOUNTAIN VALLEY, CA 92708**

15	State	Employer's state ID no. TOTAL STATE	16 State wages, tips, etc.
17	State	income tax 3370.17	18 Local wages, tips, etc.
19	Local	income tax	20 Locality name
		Federal Fili	ing Conv

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 Medicare CA. State Wages, Compensation Wages Wages Box 5 of W-2 Box 16 of W-2 Box 3 of W-2 Box 1 of W-2

Gross Pay 69,033.40 69,033.40 69,033.40 22,545.40 Reported W-2 Wages 69,033.40 0.00 0.00 22,545.40

2. Employee Name and Address.

SAI KUMAR CHITIKELA 10417 ECHO RIVER CT **FOUNTAIN VALLEY, CA 92708**

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17 State income tax

19 Local income tax

1114.46

CA.State Reference

Statement

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

Wage and Tax

1 Wages, tips, other comp. 69033.40	2 Federal income tax withheld 10461.24					
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					
000054 KH/GMX						
c Employer's name, address, a	and ZIP code					
2 BRIER HILL 2B BUILDING F	CT CK, NJ 08816					
b Employer's FED ID number 46-1223642	a Employee's SSA number XXX-XX-6542					
7 Social security tips	8 Allocated tips					
9	10 Dependent care benefits					
11 Nonqualified plans	12a					
14 Other	12b					
225.45 CA SDI	12c					
	12d					
	13 Stat emp. Ret. plan 3rd party sick pay					
e/f Employee's name, address a	and ZIP code					
SAI KUMAR CHITIKEI	A					
10417 ECHO RIVER	CT					
FOUNTAIN VALLEY,	•					
15 State CA Employer's state ID no 109-2212 8	b. 16 State wages, tips, etc. 22545.40					

18 Local wages, tips, etc.

20 Locality name

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					
000054 KH/GMX						
c Employer's name, address, a	nd ZIP code					
PROWESS IT SO 2 BRIER HILL (2B BUILDING F EAST BRUNSWIC	СТ					
b Employer's FED ID number 46-1223642	a Employee's SSA number XXX-XX-6542					
7 Social security tips	8 Allocated tips					
9	10 Dependent care benefits					
11 Nonqualified plans	12a					
14 Other	12b					
225.45 CA SDI	12c					
	12d					
	13 Stat emp. Ret. plan 3rd party sick pay					
e/f Employee's name, address ar	nd ZIP code					
SAI KUMAR CHITIKEL	Α					
10417 ECHO RIVER	СТ					
FOUNTAIN VALLEY, CA 92708						
15 State Employer's state ID no. 109-2212 8	16 State wages, tips, etc. 22545.40					
17 State income tax 1114.46	18 Local wages, tips, etc.					
19 Local income tax	20 Locality name					
CA.State Filing Copy Wage and Tax 2020						

Statement

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

69033.40

2 Federal income tax withheld

10461.24

2020 W-2 and EARNINGS SUMMARY

MA.State Reference Copy
Wage and Tax
Statement
Copy 2 to be filed with employee's State Income Tax
d Control number
Dept. Corp. Employer use only

MA.State Reference
Copy

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

Employer's name, address, and ZIP code

PROWESS IT SOLUTIONS LLC 2 BRIER HILL CT 2B BUILDING F EAST BRUNSWICK, NJ 08816

Batch #92710

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

SAI KUMAR CHITIKELA 10417 ECHO RIVER CT FOUNTAIN VALLEY, CA 92708

b	Emplo		FED ID nu 223642		а	Employee's SSA number XXX-XX-6542				
1	Wages	s, tips,	other co	mp.	2	Feder	al	income	tax withheld	
			6903	3.40					10461.24	
3	Social security wages			4 Social security tax withheld						
5	Medicare wages and tips			6	Medic	are	e tax wi	thheld		
7	Social security tips			8 Allocated tips						
9				10 Dependent care benefits						
11	1 Nonqualified plans			12a	See in	str	ructionsfo	r box 12		
11	Other				12k)				
14	Other		46.95 MAI	ремі .	120	:	<u> </u>			
			40.33 WA	r i wiL	120		<u> </u>			
					13	Stat er	np.	Ret. plan	3rd party sick p	oay
			yer's sta -10790		1 -	State	wa	ages, tip	s, etc. 46488.00	
17 State income tax 2255.71				18	Local	w	ages, tip	s, etc.		
19 Local income tax				20 Locality name						

l 1	Wages, tips, other comp.			2 Federal income tax withheld			
1	600	33.40		10461.24			
	090.	33.40			10401.24		
3	3 Social security wages			4 Social security tax withheld			
ľ	occiai cocaiii, iiago		-	Ooolai	scourty tax withincia		
5	Medicare wages and	tins	6 Medicare tax withheld				
١٠	medicare wages and	ups	١٣	Micaida	ic tax withincia		
d	Control number	Dept.		Corp.	Employer use only		
"	Control number	Dopt.		оо.р.	Zp.o,o. use only		
000054 KH/GMX							
000034 KII/GMA							

c Employer's name, address, and ZIP code

PROWESS IT SOLUTIONS LLC 2 BRIER HILL CT 2B BUILDING F EAST BRUNSWICK, NJ 08816

b	Employer's FED ID number 46-1223642	a Employee's SSA number XXX-XX-6542				
7	Social security tips	8 Allocated tips				
9		10 Dependent care benefits				
11	Nonqualified plans	12a See instructions for box 12				
14	Other	12b				
	46.95 MAPFML	12c				
		12d				
		13 Stat emp. Ret. plan 3rd party sick pay				

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

SAI KUMAR CHITIKELA 10417 ECHO RIVER CT FOUNTAIN VALLEY, CA 92708

	MA WTH-10790201-003	16 State wages, tips, etc. 46488.00
ı	17 State income tax	18 Local wages, tips, etc.
ı	2255.71	
ı	19 Local income tax	20 Locality name
ı		
ı	MA.State Fil	ng Copy
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MA.State Filing Copy

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

MA.State Filing Copy

Wage and Tax
Statement
Statement
Copy 2 to be filed with employee's State 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.

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

Gross Pay

Reported W-2 Wages

46,488.00 **46,488.00**

2. Employee Name and Address.

SAI KUMAR CHITIKELA 10417 ECHO RIVER CT FOUNTAIN VALLEY, CA 92708

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