Employee Reference Copy						
$M_2$ Wage and Tax $2020$						
<b>VV-Z</b> Statement <b>ZUZU</b>						
Copy C for employee's records.	OMB No. 1545-0008					
d Control number Dept.	Corp. Employer use only					
000022 KG/ELK	A					
c Employer's name, address, a						
ORRBA SYSTEMS LI						
452 LAKESHORE PA						
ROCK HILL, SC 2973	D					
	Batch #93052					
e/f Employee's name, address, a	and ZIP code					
NITISHA KORADA						
4850 156TH AVE NE						
APT 395						
REDMOND, WA 9805	2					
b Employer's FED ID number	a Employee's SSA number					
83-3519424	XXX-XX-7792					
1 Wages, tips, other comp.	<sup>2</sup> Federal income tax withheld					
81090.00	12245.63					
3 Social security wages	4 Social security tax withheld					
13120.00	813.44					
5 Medicare wages and tips 13120.00	6 Medicare tax withheld 190.24					
7 Social security tips	8 Allocated tips					
7 Social security tips	a Anocated lips					
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.					
17 State income tax	18 Local wages, tips, etc.					
19 Local income tax	20 Locality name					

## 2020 W-2 and EARNINGS SUMMARY



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.

		Box 1 of
Gross Pay		ŧ
Reported W-2	Wages	1

aujaciou do reneme to preduce year tr 2 etatementa						
Wages, Tips, other	Social Security	Medicare				
Compensation	Wages	Wages				
Box 1 of W-2	Box 3 of W-2	Box 5 of W-2				
81,090.00	81,090.00	81,090.00				
<b>81,090.00</b>	<b>13,120.00</b>	<b>13,120.00</b>				

2. Employee Name and Address.

## NITISHA KORADA 4850 156TH AVE NE APT 395 REDMOND, WA 98052

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1 Wages, tips, other comp. 81090.00	2 Federal income tax withheld 12245.63	1 Wages, tips, other comp. 81090.00	2 Federal income tax withheld 12245.63	1 Wages, tips, other comp. 81090.00	2 Federal income tax withheld 12245.63	
3 Social security wages 13120.00	4 Social security tax withheld 813.44	3 Social security wages 13120.00	4 Social security tax withheld 813.44	<sup>3</sup> Social security wages 13120.00	4 Social security tax withheld 813.44	
5 Medicare wages and tips 13120.00	6 Medicare tax withheld 190.24	5 Medicare wages and tips 13120.00	6 Medicare tax withheld 190.24	5 Medicare wages and tips 13120.00	6 Medicare tax withheld 190.24	
d Control number Dept.	Corp. Employer use only	d Control number Dept.	Corp. Employer use only	d Control number Dept.	Corp. Employer use only	
000022 KG/ELK	Α	000022 KG/ELK	A	000022 KG/ELK	Α	
C Employer's name, address, a ORRBA SYSTEMS LL 452 LAKESHORE PAF ROCK HILL, SC 29730	C RKWAY STE 208	C Employer's name, address, and ZIP code ORRBA SYSTEMS LLC 452 LAKESHORE PARKWAY STE 208 ROCK HILL, SC 29730		<ul> <li>C Employer's name, address, and ZIP code</li> <li>ORRBA SYSTEMS LLC</li> <li>452 LAKESHORE PARKWAY STE 208</li> <li>ROCK HILL, SC 29730</li> </ul>		
b Employer's FED ID number 83-3519424	a Employee's SSA number XXX-XX-7792	b Employer's FED ID number 83-3519424	a Employee's SSA number XXX-XX-7792	b Employer's FED ID number 83-3519424	a Employee's SSA number XXX-XX-7792	
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 a	nd ZIP code	
NITISHA KORADA			NITISHA KORADA			
4850 156TH AVE NE			4850 156TH AVE NE			
APT 395		APT 395		APT 395		
REDMOND, WA 98052	2	REDMOND, WA 98052		REDMOND, WA 98052	2	
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	
Wage and Tax 2020 Statement OMB No. 1545-0008		W-2 Wage a Statement Copy 2 to be filed with employee's State	nd Tax 2020	W-2 Wage a Statem Copy 2 to be filed with employee'sCity of	nd Tax <b>2020</b>	