2020 W-2 and EARNINGS SUMMARY



Employee Reference Wage and Tax Statement Statement Copy OMB No. 1545-0008

Copy C for employee's records.

d Control number O00158 RO/ZS9 Dept. Corp. Employer use only A 23

c Employer's name, address, and ZIP code

DATA SOLUTIONS INC 28345 BECK ROAD STE 406 WIXOM, MI 48393

Batch #92090

e/f Employee's name, address, and ZIP code MAHENDER RAJU KALLEPELLI 350 E VISTA RIDGE MALL DR LEWISVILLE, TX 75067

Employer's FED ID number 38-3378666	a Employee's SSA number XXX-XX-4066
Wages, tips, other comp.	2 Federal income tax withheld
101729.60	13224.84
Social security wages	4 Social security tax withheld
101729.60	6307.24
Medicare wages and tips 101729.60	6 Medicare tax withheld 1475.08
Social security tips	8 Allocated tips
	10 Dependent care benefits
Nonqualified plans	12a See instructionsfor box 12
Other	12b
Other	12c
	12d
	13 Statemp Ret. plan 3rd party sick pay
State Employer's state ID no	. 16 State wages, tips, etc.
State income tax	18 Local wages, tips, etc.
Local income tax	20 Locality name
	38-3378666 Wages, tips, other comp. 101729.60 Social security wages 101729.60 Medicare wages and tips 101729.60 Social security tips Nonqualified plans Other State Employer's state ID no

 1
 Wages, tips, other comp. 101729.60
 2
 Federal income tax withheld 13224.84

 3
 Social security wages 101729.60
 4
 Social security tax withheld 6307.24

 5
 Medicare wages and tips 101729.60
 6
 Medicare tax withheld 1475.08

 d
 Control number 000158
 Dept. Corp. Employer use only A 23

Employer's name, address, and ZIP code

DATA SOLUTIONS INC 28345 BECK ROAD STE 406 WIXOM, MI 48393

b	Employer's FED ID number 38-3378666	a Employee's SSA number XXX-XX-4066				
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 an	d ZIP code				

MAHENDER RAJU KALLEPELLI 350 E VISTA RIDGE MALL DR LEWISVILLE, TX 75067

15	State	Employer's	state II	D no.	16 State wages, tips, etc.
17	State	income tax			18 Local wages, tips, etc.
19	Local	income tax			20 Locality name

Federal Filing Copy

Wage and Tax

Statement
CopyB 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 Compensation Wages Wages Wages Box 1 of W-2 Box 3 of W-2 Box 5 of W-2

Gross Pay 101,729.60 101,729.60 101,729.60 Reported W-2 Wages 101,729.60 101,729.60 101,729.60

2. Employee Name and Address.

MAHENDER RAJU KALLEPELLI 350 E VISTA RIDGE MALL DR LEWISVILLE, TX 75067

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1 Wages, tips, other c 1017	2 Federal income tax withheld 13224.84				
3 Social security wage 1017	4 Social security tax withheld 6307.24				
5 Medicare wages and 1017	6 Medica	re tax withh	neld 1475.08		
d Control number Dept.		Corp.	Employer	use only	
000158 RO/ZS9			Α	23	
c Employer's name, address, and ZIP code					

DATA SOLUTIONS INC 28345 BECK ROAD STE 406 WIXOM, MI 48393

Employer's FED ID number 38-3378666	a Employee's SSA number XXX-XX-4066
Social security tips	8 Allocated tips
	10 Dependent care benefits
Nonqualified plans	12a
Other	12b
	12c
	12d
	13 Stat emp. Ret. plan 3rd party sick pay
	Social security tips Nonqualified plans

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

MAHENDER RAJU KALLEPELLI 350 E VISTA RIDGE MALL DR LEWISVILLE, TX 75067

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

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

1	1 Wages, tips, other comp. 101729.60			2	Federa	income tax 13	withheld 224.84
3 Social security wages 101729.60			4	Social	security tax	withheld 307.24	
5 Medicare wages and tips 101729.60			6	Me dica	re tax withhe 1	^{ld} 475.08	
d	Control	number	Dept.		Corp.	Employer	use only
00	0158	RO/ZS9				Α	23

c Employer's name, address, and ZIP code

DATA SOLUTIONS INC 28345 BECK ROAD STE 406 WIXOM, MI 48393

b	Employer's FED ID number 38-3378666	a Employee's SSA number XXX-XX-4066
7	Social security tips	8 Allocated tips
9		10 Dependent care benefits
11	Nonqualified plans	12a
14	Other	12b
		12c
		12 d
		13 Stat emp. Ret. plan 3rd party sick pay

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

MAHENDER RAJU KALLEPELLI 350 E VISTA RIDGE MALL DR LEWISVILLE, TX 75067

15	State	Employer's	state	ID	no.	16	State wages, tips, etc.
		i					-
17	State	income tax				18	Local wages, tips, etc.
19	Local	income tax				20	Locality name

City or Local Reference Copy

Wage and Tax

Statement
Copy 2 to be filed with employee's City or Local Income Tax Return.