



W-2 Wage and Tax Statement
 Employee Reference Copy
2020
 Copy C for employee's records. OMB No. 1545-0008

d Control number 000195	Dept. R4/FLJ	Corp.	Employer use only A	29
c Employer's name, address, and ZIP code TEKINVADERZ LLC 2490 E OAKTON ST STE A ARLINGTON HEIGHTS, IL 60005 Batch #90892				
e/f Employee's name, address, and ZIP code AKHILESH VARMA GUDURI 164 LAUREL WAY APT 3A HERNDON, VA 20170				
b Employer's FED ID number 46-5582856	a Employee's SSA number XXX-XX-1723			
1 Wages, tips, other comp. 77500.00	2 Federal income tax withheld 12336.83			
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 GA	Employer's state ID no. 3238305-LT	16 State wages, tips, etc. 77500.00		
17 State income tax 4073.84	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.

	Wages, Tips, other Compensation Box 1 of W-2	Social Security Wages Box 3 of W-2	Medicare Wages Box 5 of W-2	GA. State Wages, Tips, Etc. Box 16 of W-2
Gross Pay	77,500.00	77,500.00	77,500.00	77,500.00
Reported W-2 Wages	77,500.00	0.00	0.00	77,500.00

2. Employee Name and Address.

AKHILESH VARMA GUDURI
164 LAUREL WAY APT 3A
HERNDON, VA 20170

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b Employer's FED ID number 46-5582856	a Employee's SSA number XXX-XX-1723			
7 Social security tips	8 Allocated tips			
9	10 Dependent care benefits			
11 Nonqualified plans	12a See instructions for box 12			
14 Other	12b			
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e/f Employee's name, address and ZIP code AKHILESH VARMA GUDURI 164 LAUREL WAY APT 3A HERNDON, VA 20170				
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Federal Filing Copy
W-2 Wage and Tax Statement
 Copy B to be filed with employee's Federal Income Tax Return. OMB No. 1545-0008

1 Wages, tips, other comp. 77500.00	2 Federal income tax withheld 12336.83			
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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 AKHILESH VARMA GUDURI 164 LAUREL WAY APT 3A HERNDON, VA 20170				
15 State GA	Employer's state ID no. 3238305-LT	16 State wages, tips, etc. 77500.00		
17 State income tax 4073.84	18 Local wages, tips, etc.			
19 Local income tax	20 Locality name			

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

1 Wages, tips, other comp. 77500.00	2 Federal income tax withheld 12336.83			
3 Social security wages	4 Social security tax withheld			
5 Medicare wages and tips	6 Medicare tax withheld			
d Control number 000195	Dept. R4/FLJ	Corp.	Employer use only A	29
c Employer's name, address, and ZIP code TEKINVADERZ LLC 2490 E OAKTON ST STE A ARLINGTON HEIGHTS, IL 60005				
b Employer's FED ID number 46-5582856	a Employee's SSA number XXX-XX-1723			
7 Social security tips	8 Allocated tips			
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e/f Employee's name, address and ZIP code AKHILESH VARMA GUDURI 164 LAUREL WAY APT 3A HERNDON, VA 20170				
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GA. State Filing Copy
W-2 Wage and Tax Statement
 Copy 2 to be filed with employee's State Income Tax Return. OMB No. 1545-0008